ALCOHOL CONSUMPTION ON DOMESTIC VIOLENCE

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ALCOHOL CONSUMPTION ON DOMESTIC VIOLENCE

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ABSTRACT

The objectives of this qualitative research were to study the pattern of alcohol consumption affecting domestic violence and to study the characteristics and extent of domestic violence. The research collected data using in-depth structure interview questionnaires, voice record, and non-participating observation. The sample group contained 17 people, of which 8 were perpetrators and 9 were victims of domestic violence. Data analysis was done utilizing the descriptive method.

The research has identified a pattern of alcohol consumption that affects domestic violence. It shows that the perpetrators started drinking alcohol between 15 to 22 years of age and had drunk alcohol for more than 10 years. The common types of alcohol were Thai traditional vodka (Lao Khao), Brown spirit (Lao See) and beer. In terms of frequency of alcohol consumption, the perpetrators drank everyday or almost everyday. In respect of the quantity of alcohol consumption each time, the Thai traditional vodka (Lao Khao)'s group drank half to two bottles, the Brown spirit (Lao See)'s group drank half to one and half bottles, and the beer's group drank one to two and half bottles. For the location of alcohol consumption, it is found that those who drank at home alone in the evening spent around 60 baht each time. Those who drank at home alone all day spent around 80-200 baht, and those who drank with friends after work spent 200 baht or more each time.

In relation to the characteristics and extent of domestic violence, male perpetrators committed medium level of psychological violence most often, which included yelling and raising the voice. For the female victims, they experienced medium level of psychological violence the most, which included yelling, and raising voices. In terms of physical violence, it is found that the male perpetrators committed strong level of physical violence the most, including kicking, and punching. The female victims experienced medium and low levels of physical violence the most, which included slapping, hitting, pushing with feet, and throwing things at.

It is suggested that the most effective methods of prevention of domestic violence are health education to raise the awareness of alcohol intoxication to the brain, and the hazards of heavy alcohol drinking as opposed to moderate drinking, combined with anti-drinking campaigns. It is also important to establish Help Center in every province for women who have suffered domestic violence.

KEY WORDS: DOMESTIC VIOLENCE/ ALCOHOL CONSUMPTION
134 pp.

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การบริโภคเครื่องดื่มแอลกอฮอล์ที่มีต่อปัญหาความรุนแรงในครอบครัว (ALCOHOL CONSUMPTION ON DOMESTIC VIOLENCE)

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บทคัดย่อ

การวิจัยนี้เป็นการวิจัยเชิงคุณภาพ มีวัตถุประสงค์เพื่อศึกษาแบบแผนการบริโภคเครื่องดื่มแอลกอฮอล์ที่มีต่อปัญหาความรุนแรงในครอบครัว รวมถึงศึกษาลักษณะและระดับของความรุนแรงในครอบครัวที่เกิดจากการบริโภคเครื่องดื่มแอลกอฮอล์ รวบรวมข้อมูลด้วยวิธีการสัมภาษณ์เชิงลึกแบบมีโครงสร้าง การบันทึกเทป และการสังเกตแบบไม่มีส่วนร่วม กลุ่มตัวอย่างจำนวน 17 ราย เป็นผู้กระทำรุนแรง 8 ราย ผู้ถูกกระทำรุนแรง 9 ราย จากสถาบันธัญญารักษ์และมูลนิธิเพื่อนหญิงตามลำดับ วิเคราะห์ข้อมูลโดยวิธีการพรรณนาและวิเคราะห์เนื้อหา

ผลการศึกษาพบว่า แบบแผนการบริโภคเครื่องดื่มแอลกอฮอล์ ที่มีต่อความรุนแรงในครอบครัวได้แก่ อายุที่เริ่มดื่มแอลกอฮอล์ พบว่า อยู่ในช่วงอายุ 15 - 22 ปี ระยะเวลาที่ดื่มมากกว่า 10 ปี ชนิดของเครื่องดื่มแอลกอฮอล์ที่ดื่มประจำได้แก่ เหล้าขาว เหล้าสี เบียร์ ความถี่ในการดื่มแอลกอฮอล์พบว่าผู้กระทำรุนแรงดื่มทุกวันหรือเกือบทุกวัน ปริมาณในการดื่มแต่ละครั้ง กลุ่มที่ดื่มเหล้าขาวจะดื่มในปริมาณตั้งแต่ครึ่งขวดถึงสองขวดกลม กลุ่มที่ดื่มเหล้าสีจะดื่มในปริมาณครึ่งขวดถึงหนึ่งขวดครึ่ง และกลุ่มที่ดื่มเบียร์จะดื่มในปริมาณ หนึ่งขวดถึงสองขวดครึ่ง สถานที่ดื่มพบว่า ผู้ที่ดื่มที่บ้านคนเดียวตอนเย็นมีค่าใช้จ่ายครั้งละประมาณ 60 บาท ผู้ที่ดื่มคนเดียวที่บ้านและดื่มทั้งวันมีค่าใช้จ่ายประมาณ 80-200 บาท และผู้ที่ดื่มกับเพื่อนตอนเย็นหลังเลิกงาน มีค่าใช้จ่ายประมาณ 200 บาทขึ้นไป ลักษณะและระดับความรุนแรงในครอบครัวพบว่า ผู้ชายใช้ความรุนแรงด้านจิตใจระดับปานกลางมากที่สุดได้แก่ การใช้เสียงข่มขู่ พูดเฉียงเสียงดัง ตะคอกตะวาด ในส่วนของผู้หญิงซึ่งเป็นผู้ถูกกระทำได้รับความรุนแรงด้านจิตใจระดับปานกลางมากที่สุดได้แก่ การใช้เสียงข่มขู่ พูดเฉียงเสียงดัง ตะคอกตะวาด ความรุนแรงด้านร่างกายพบว่าผู้ชายใช้ความรุนแรงด้านร่างกายระดับสูงมากที่สุด และลักษณะความรุนแรงที่ใช้ได้แก่ การเตะ การชก ผู้หญิงได้รับความรุนแรงด้านร่างกายระดับปานกลางและระดับต่ำมากที่สุด ลักษณะความรุนแรงที่ผู้หญิงถูกกระทำได้แก่ การตบ ตี ถีบ และขว้างปาสิ่งของใส่

ข้อเสนอแนะ การให้ความรู้ถึงพิษของแอลกอฮอล์ที่มีผลต่อสมอง พฤติกรรมการดื่มแอลกอฮอล์แบบอันตราย การดื่มแอลกอฮอล์ในปริมาณที่พอเหมาะและไม่เป็นอันตรายต่อตนเอง ครอบครัว สังคม ควบคู่กับการรณรงค์ ลด ละ เลิกดื่มแอลกอฮอล์ และการจัดตั้งหน่วยงานเพื่อให้ความช่วยเหลือผู้หญิงที่ประสบปัญหาความรุนแรงในครอบครัวทุกจังหวัดจึงจะสามารถป้องกันปัญหาความรุนแรงในครอบครัวได้อย่างมีประสิทธิภาพ

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CHAPTER I
INTRODUCTION

1.1 Background and the significance of the study

Domestic violence is a significant problem in the society and the number and levels of violence have increased over the years, resulting in many other problems, including physical and mental health and social problems. Victims of domestic violence, who most of them are likely to be women, experience anxiety, depression and other emotional distress, physical stress symptoms, suicide attempts, alcohol and drug abuse, sleep disturbances, reduced coping and problem solving skills, loss of self esteem and confidence, social isolation, fear of starting new relationships, living in fear, and other major impacts on quality of life (Ronchai Kongsakon, 2005: 50). Immediate impacts often described for children of victims include emotional and behavioral problems, lost school time and poor school performance, adjustment problems, stress, reduced social competence, bullying and excessive cruelty to animals, running away from home, and relationship problems. Domestic violence directly affects the victims, their children, their families and friends, employers, co-workers, and has repercussions for the quality of life in a local community. There can be far-reaching financial, social, health and psychological consequences. The impact of violence can also have indirect costs, including the costs to the community of bringing perpetrators to justice or the costs of medical treatment for injured victims. (www.aph.gov.au)

Consequently, domestic violence is no longer just private or family issues, but it is the issues that need to be addressed by the communities and the government to find the solutions to prevent and intervene with domestic violence. (www.who.int)It is found that all around the world women of all ages are targets or victims of all kinds of domestic violence. Domestic violence occurs when a family member, partner or ex-partner attempts to physically or psychologically dominate or harm the other. Domestic violence can be exhibited in many forms, including physical violence,

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sexual abuse, emotional abuse, intimidation, economic deprivation or threats of violence. Physical violence includes slap, punch, pinch, kick, beating with objects, etc, in which the degrees of violence vary from minor to fatal. Emotional abuse may involve economic deprivation, threats of violence, verbal abuse, causing anxiety, intimidation, fear, trauma, or depression. Sexual abuse is described to involve both physical and emotional abuses such as forcible fondling, rape, or forcible sex positions. (Krittiya Aachavanidkun, 2003: 5, Yaovaret Vorakikankun, 2001: 10-11, Vaewrung Navabunniyom, 2001: 2)

Domestic violence is a crime that often occurs in family at home where normally is perceived to be the safest place, therefore making this type of crime difficult to detect and prevent. Most perpetrators are male family members who are often in the position of trust and as a result are easily overlooked and unsuspected by the victims at the first place. Moreover, most incidences of domestic violence often go unreported as family members tend to cover them up and keep them from outsiders due to the sense of disgrace and social values and cultures that see domestic violence as a private family matter that should be privately dealt within families and that it is shameful to review private family matters to outsiders. Family members' failure to report incidents of domestic violence is considered a breakdown of social justice as perpetrators should be brought to justice and punished. As perpetrators can get away with their crimes, they often feel no remorse to what they have done to the victims and tend to escalate the levels and extents of violence. It is believed that the number of reported cases in domestic violence is far lower that the reality.

World Health Organization (WHO) reported that in many countries 10% to 50% of women had experienced physical assaults by their husbands or partners and 12% to 25% had been raped by their husbands or partners. (Vilasini Pananakonsap, 2003: 13). In USA, the report shows that 80% of physical assaults against women are committed by partners or ex-partners.('Domestic Violence' conference paper,2006: 4).

According to the statistics from Friends of Women Foundation in relation to the number of consultations for women in crisis between 2003 to 2005, the number of consultations was1,440 cases in 2003, 1,275 cases in 2004, and 1,461 cases in 2005. The trend of domestic violence against women has been rising in past 3 years, especially in 2005. In 2005, 695 cases were classified into the 'legal subject matters'

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category, which accounts for 48% of all the reported cases and 766 cases or 52% of all the reported cases fell into the 'social work matters' category. Most of the consultation recipients were women. Family problems had the highest number of consultation recipients accounting for 496 cases or 65% of the total number of reported cases in social work areas. It comprises 199 cases of husbands involving in infidelity with other women, 99 cases of physical assaults by husbands, 80 cases of uncommitted husbands, and 118 cases of others family conflicts. (Friends of Women Foundation, 2006: 4-14).

Furthermore, the analysis of the incidences of domestic violence in Thailand reported in 5 major newspapers- Thairath, Dailynews, Khaosod, Matichon & Krungthep Turakij in 2005 found that there were 603 domestic violence related incidences. The most common incidences were homicide murders in households, which accounted for 369 incidences. There were 97 cases for abandoned infants, 58 cases for domestic physical assaults, 46 cases for domestic sexual assaults, and 33 cases for others. Out of 58 cases for domestic physical assaults in 2005, 51 cases were assaults that occurred among family members themselves, in which 22 cases for husbands assaulting wives; 8 cases for husbands assaulting children; 7 cases for wives assaulting husbands. The natures of domestic violence problems has remained unchanged, only do the number of incidences substantially rises, compared with 386 cases reported in 2004- increased by 217 cases or 22%. (Friends of Women Foundation, 2006: 73)

The statistics from OSCC collected from 70 hospitals between October 2003 and September 2004 review there were 6,596 service recipients, in which 3,335 or 50.56% are women, whose offenders are someone close to them such as husbands, partners, family members, or friends. ('Domestic Violence' conference paper, 2006: 14)

The problem of domestic violence can be complicated in nature, as there are often many factors involved ranging from personal issues, family issues and social issues including social values and cultures. Some believe in inequality between men and women and that women have lower status than men and men have more power and are legitimate to control women and children. Also, studies find that alcohol consumption is one factor that leads to domestic violence. Women whose husbands

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drink alcohols have the higher rate of domestic violence, which is 75.8% compared with 10.7% for women whose husbands do not drink alcohol. High alcohol consumption of Thai men often causing them to lose self control is one major condition that leads to physical assaults against their partners. (Donnapa Hongthong, 2000:121). The researches overseas have also found that 19.2% of husbands who consume alcohols commit physical assaults against their partners. The rate of physical assaults is 3 times higher than husbands who do not consume alcohols. It is estimated that around 1 in 4 of domestic assaults occurred after husbands had consumed alcohols. (Kentor and Straus, 1990 quoted in Ward, 1994: 286, cited in Bunsirm Hutapaet, 2003: 3).

The study of correlation between alcohol consumption and domestic assaults against partners indicates that 25%-85% of domestic violence cases are caused by alcohol consumption as alcohols can influence and trigger violent behavior and assaults. (Mckenry, 1995: 309-318) This is corresponding with the study of Ronchai Kongsakon that found that 83% of families with domestic violence also had problems of alcohol abuse and that families with members consuming alcohols were 3.84 times more likely to use violence than families without alcohol consumption. (Ronchai Kongsakon, 2005: 50)

The result of the study of blood alcohol levels in relation to changes in behavior and emotion of consumers has found that high level of alcohol- 100-200 mg% results in impairs in nervous systems such as slow reaction time, impaired memory, Ataxia, in-coordination (Sompop Reungtrakun, 2003: 35).And also associate with duration of drinking, level of blood alcohol (The slope effect), place, person and occasion. (Songkiat, 2545:83)

At present, alcohol consumption situations worldwide are in crisis. WHO estimates that 76.3 million people around the world have alcohol-related illnesses- that is 2,100 people every hour. Alcohols account for 3.2% of the cause of premature death and 4% of the causes of various illnesses worldwide. Alcohols are also ranked number 5 in the most dangerous addictives after Heroin, Cocaine, Barbiturate, and Methadone. (www.thaihealth.or.th).

In Thailand, the data in 1999 found that the burden of diseases as a result of alcohol consumption was ranked number 3, after unsafe sex and tobacco smoking.

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The economic costs for road accidents were estimated to be 2-3% of the national GDP or 100,000 million baht annually. (Yongyut Kajontham and others, 2004:3)

In 2005, WHO backdated and updated alcohol consumption database. It found that Thailand consumed alcohols totaling 8.47 liters annually ranked number 40 in the world, which comprise 7.13 liters of Spirit per person per year ranked the world number 5, 1.31 liters of beer per person per year ranked the world number 85, and 0.04 liters of wine per person per year ranked the world number 124. (www.thaihealth.or.th, 08/06/2006)

According to the latest survey by the Statistics Institute of Thailand in 2003, 18.61 millions or 35.46% of the population in Thailand aged 11 years old or over drank alcohols, in which male alcohol drinkers accounted for 15.51 millions or 60.80% of the total male population aged 11 years old or over, whereas female alcohol drinkers accounted for 3.95 millions or 14.51% of the total female population aged 11 years old or over.

The level of national alcohol consumption, only for alcohols produced in the country accounts for 3,691 million liters, valued at 150,000,000,000 baht. (Yongyut Kajontham, Bungon Ridpakdee, 2004: 12). The data from WHO also reviews that 21.2% of male adolescents aged between 11-19 years old drink alcohols and the trend in past 7 years (1996-2003) had been the number of female adolescents aged between 11 to 19 years old had increased almost 6 times. (www.thaihealth.or.th)

The data above indicate that over-consumption of alcohols leads to social, family, and health problems, including death and disability. The prevention of all kinds of alcohol-related problems requires clear policies and measures in both national and local levels. The policies in order to control alcohols problems include the policy for the benefit of the Government, the supply control, the traffic/ road accident control, alcohols controls for the benefit of public health. (Bundit Sorn paisan, 2005: 3).

In the literature review, it is shown that most of the previous researches studied factors and effects of alcohol consumption on domestic violence against women. The research is therefore interested in studying the topic emphasizing the characteristics and extent of violence and the effects on victims physically, mentally, and emotionally. Comprehensive details and data are required to help in understanding the

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issues and in finding solutions and recommendations to prevent domestic violence problems.

1.2 Research problems/ issues

What are the characteristics and the extents of domestics violence as a result of alcohol consumption?

1.3 Objectives of the research

1.3.1 To study the pattern of alcohol consumption on domestic violence.

1.3.2 To study the characteristics and the extents of domestic violence.

1.4 Scope of the research

This research studies alcoholic patients admitted in Thanyarak Institution and Victims from domestic violence who have approached Friend of Women Foundation for consultation, using qualitative approach, In-depth interviews with using a tape recording and Non- participant observation in conducting the research.

1.5 Definition of words in the research

1.5.1 Alcoholic drinks are drinks containing ethanol causing drunkenness. The level of drunkenness depends on the level and amount of alcohol in the particular drinks. Type of alcoholic drinks include Liquor, Palm wine, Beer,, Brandy,, wines,, whisky,, Vodka, etc.

1.5.2 Families mean couples- man and woman, who are married or living together as a de facto.

1.5.3 Domestic violence means the act of violence or willful neglect within a family. Any hurtful or unwanted behavior perpetrated upon an individual by an intimate or prior intimate. Domestic violence is classified mainly into 2 aspects

1.5.3.1 Physical abuse involves using force or any tools as a weapon causing victims physical injuries. Violent acts range from pushing, slapping, pinching, pulling hair, throwing things, hitting to the very high level of violence such as strangling, kicking, punching.

1.5.3.2 Psychological and emotional abuse involves a serious mistreatment of another person's feelings or emotional needs causing sadness, trauma,

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fears, disgrace, depression, humiliation, intimidation or loss of freedom. Violent acts include swearing, using coarse language, yelling, shouting, verbal insults, threatening, or emotional abuse such as refusing to talk to, committing infidelity/ adultery, and willful neglect in raising children.

1.5.4 Extents of violence refer to the effects of violence on victims. Violence is classified into 2 types- physical and psychological in which the extents of violence can be classified further into 3 categories for each type of violence.

1.5.4.1 Psychological violence refers the effect of violence in which victims receive psychological trauma and distress. It can be classified into 3 categories as follows:

1) Mild psychological violence such as

Ignorance

Refusing to talk to

Storming out of the house

Crying

2) Medium psychological violence such as

Swearing

Using coarse languages

Verbal insulting

Humiliating

Intimidating.

3) Strong psychological violence includes intention to harm or assault victims such as

Threatening to revenge

Threatening to beat up or to throw things at the victims (but no objects/ items in hands)

Smashing objects

Referring to victims' parent in an insulting manner.

1.5.4.2 Physical violence refers to the physical effect of violence which can be classified into 3 categories as follows:

1) Mild physical violence such as

Throwing things at the victims

Pulling

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Pushing

Pinching

Biting

Pulling hair

Dragging

2) Medium physical violence such as

Slapping

Hitting

Beating

3) Strong physical violence such as

Kicking

Punching

Strangling

Threatening with weapons

Attacking with weapons

1.6 Benefits from the research

1.6.1 To be aware of the effects of alcohol consumption on domestic violence.

1.6.2 To be aware of the characteristics and extents of domestic violence caused by alcohol consumption.

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CHAPTER II
LITERATURE REVIEW

In the study of the pattern of alcohol consumption on domestic violence, the following are the literature reviews, theories, and relevant researches.

2.1 Theories and effects of alcohol consumption

2.1.1 Definition of Alcohols

2.1.2 Types of alcoholic beverages

2.1.3 Absorption and metabolism of alcohols

2.1.4 Alcohol dependence

2.1.5 Effects of alcohol consumption on the body

2.1.6 Other effects of alcohol consumption

2.2 Theories of domestic violence

2.2.1 Definition of ‘family’

2.2.2 Definition of ‘domestic violence’

2.2.3 Types of domestic violence

2.2.4 Extents of domestic violence

2.2.5 Factors contributing to domestic violence

2.2.6 Theories and approaches in explaining domestic violence

2.2.6.1 Psychological Approach

2.2.6.2 Sociological Approach

2.2.6.3 Feminist Approach

2.3 Relevant researches

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2.1 Theories and effects of alcohol consumption

Beverage alcohol (scientifically known as ethyl alcohol or ethanol) is produced by fermenting or distilling various fruits, vegetables, or grains. Alcohol arises naturally from carbohydrates when certain micro-organisms such as yeasts metabolize them in the absence of oxygen, called fermentation. Ethyl alcohol itself is a clear, colorless liquid. Alcoholic beverages get their distinctive colors from the diluents, additives, and by-products of fermentation.

Beer is fermented to contain about 5% alcohol by volume (or 3.5% in light beer). Most wine is fermented to have between 10% and 14% alcohol content; however, such fortified wines as sherry, port, and vermouth contain between 14% and 20%. Distilled spirits (whisky, vodka, rum, gin) are first fermented, and then distilled to raise the alcohol content. The concentration of alcohol in spirits is 40% by volume. Some liqueurs may be stronger. (www.xs4all.nl)

2.1.1 Definition of alcohol

Alcohol is a liquor or brew containing alcohol as the active agent (wordnet.princeton.edu/perl/webwn)

Alcohol refers to Ethyl alcohol or ethanol, an intoxicating by-product of fermentation, which is caused by yeast acting on sugars in the malt. Alcohol content is expressed as a percentage of volume or weight. (Chet Ratchadapunnathikul, Wanna Bunsrimeung, 2005:9)

Alcohol refers Ethyl alcohol containing the substance that has depressive effects on the central nervous system. Alcohol consumption is common amount people, including mental patients. (Kaplan & Sadock, 1990 cited in Prapai Thayayut, 2002:7)

Also, alcohol has its unique definitions according each study area- ‘alcohol’ medical definition and ‘alcohol’ legal definition.

Medical definition of alcohol is any beverages containing not over 60% of alcohol (Ethyl alcohol or ethanol), which is considered consumable. Alcohol is produced by fermenting or distilling ‘primary agricultural origin’ such as various fruits, vegetables, or grains. (Chet Ratchadapunnathikul, Wanna Bunsrimeung, 2005: 10)

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Legal definition of alcohol according to Alcohol Acts, section 4 is any alcohol mixtures consumable like alcohol or if not consumable, but when mixed with water of other liquid, becoming consumable like alcohol.

Fermented alcohol refers to alcohol that has not been distilled, including fermented alcohol mixed with distilled alcohol, but alcohol content is not over 15 degrees by volume.

Distilled alcohol refers to alcohol that has been distilled, including distilled alcohol mixed with fermented alcohol, but alcohol content is over 15 degrees.

Samtub alcohol refers to distilled alcohol that has over 80 degrees alcohol content.

Thai traditional vodka (Lao Khao) refers to distilled alcohol that has no color or other additive substances and contains less than 80 degrees alcohol content.

Special liquor refers to distilled alcohol produced through special process and has less than 80 degree alcohol content such as Whiskey, Brandy.

It can be concluded that alcohol is any beverages containing ethyl alcohol. It has depressive effects on the central nervous systems and can cause intoxication depending on the amount and content of alcohol. Alcohol use generally is socially acceptable.

2.1.2 Types of alcoholic beverages commonly consumed in Thailand (Dhepin Pacharanurak, 1998: 6-7)

Alcoholic beverages can be classified into two groups based on the production process and the content of alcohol (° alcohol) - ‘Fermented beverages’ such as wine, cider, beer, etc. and ‘Distilled beverages’ (distillation increases the alcohol content) such as certain apéritifs, liqueurs, brandy, cognac, etc.

1. Brandy is a potable spirit, distilled from a fermented mash of grapes or other fruit. Most brandy is distilled from wine. White wine, made from white grapes, is used most often. There are import brandy and brandy produced in Thailand. Brandy is usually very expensive.

2. Whisky is a spirit, aged in wood, obtained from the distillation of a fermented mash of grain. Whiskey is produced in four countries: the United States, Canada, Scotland, and Ireland. The whiskeys produced in Canada, Ireland, and

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Scotland take on the name of their countries. Whiskeys produced in other countries, even though they may taste similar, cannot legally be called Canadian, Irish, or Scotch

3. Rice Wine is a sweet, golden wine made from fermenting freshly steamed glutinous rice. Most rice wines are low in alcohol. The most well-known Japanese rice wines are sake and mirin. Rice wine is popular in the rural areas of Thailand or among low income population.

4. Wine is an alcoholic beverage resulting from the fermentation of grapes or grape juice.

5. Beer is made from malted grains, hops, yeast, and water, which is not distilled after fermentation. The process of beer production is called brewing. The grain is usually barley or wheat, but sometimes corn and rice are used as well. Fruit, herbs, and spices may also be used for special styles.

Table 1 show alcohol content and calories of various types of beverages.

Beverage	Percent of alcohol	Calories/100ml
Wine	8-12%	35-60
Beer	3.5-6%	40-60
Brandy	40-55%	225-300
Rum	40-55%	225-300
Gin	40-55%	220-300
Vodka	40-55%	220-300
Whiskies	40-55%	220-300

Resource: www.pharm.chula.ac.th

2.1.3 Alcohol absorption and metabolism

When alcohol is consumed, it passes from the stomach and intestines into the blood, a process referred to as absorption. Alcohol is then metabolized by enzymes, which are body chemicals that break down other chemicals. In the liver, an enzyme called alcohol Dehydrogenase (ADH) mediates the conversion of alcohol to acetaldehyde. Acetaldehyde is rapidly converted to acetate by other enzymes and is eventually metabolized to carbon dioxide and water. Alcohol also is metabolized in the liver by the enzyme cytochrome P450IIE1 (CYP2E1), which may be increased after chronic drinking. Most of the alcohol consumed is metabolized in the liver, but

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the small quantity that remains unmetabolized permits alcohol concentration to be measured in breath and urine. The alcohol metabolism process is as depicted below:

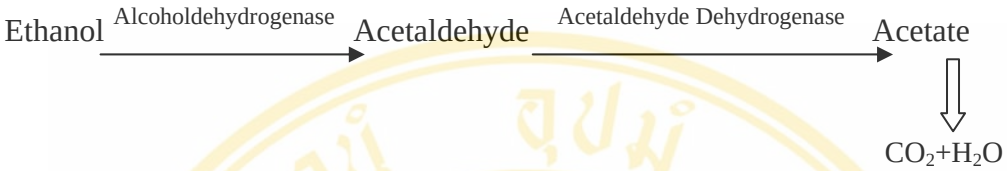

Figure 1. The alcohol metabolism.

Resource : Songkiat Piyaka and association, 2002: 81

A number of factors influence the absorption process, including the presence of food and the type of food in the gastrointestinal tract when alcohol is consumed. The rate at which alcohol is absorbed depends on how quickly the stomach empties its contents into the intestine. The higher the dietary fat content, the more time this emptying will require and the longer the process of absorption will take. One study found that subjects who drank alcohol after a meal that included fat, protein, and carbohydrates absorbed the alcohol about three times more slowly than when they consumed alcohol on an empty stomach.

Women absorb and metabolize alcohol differently from men. They have higher BAC's after consuming the same amount of alcohol as men and are more susceptible to alcoholic liver disease, heart muscle damage, and brain damage. The difference in BAC's between women and men has been attributed to women's smaller amount of body water, likened to dropping the same amount of alcohol into a smaller pail of water. An additional factor contributing to the difference in BAC's may be that women have lower activity of the alcohol metabolizing enzyme ADH in the stomach, causing a larger proportion of the ingested alcohol to reach the blood. The combination of these factors may render women more vulnerable than men to alcohol-induced liver and heart damage. (www.stopaddiction.com)\

2.1.4 Alcohol dependence

Alcohol dependence is usually caused by various factors such as biological factors, psychological factors and social and cultural factors.

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2.1.4.1 Biological factors

Biological factors have correlation with alcohol dependence. The first factor is genetics. This theory was derived from the study of the history of twins in families with alcohol consumption history. It is found that identical twins have higher level of correlation in alcohol dependence than un-identical twins. (Riggin & Redding, 1996 and Vallant, 1993 cited in Johnson, 1997 referred in Friends of Women Foundation, 2003: 13). The other factor affecting alcohol dependence is neurochemical, which is related to neurotransmitter and brain mechanism. Malfunction or genetic predisposition to the condition may lead to substance dependence such as alcohol. (Songkiet Piyaka and associates, 2002, 16-17, Prapai Thayayut, 2002: 9)

2.1.4.2 Psychological factors

Psychological factors refer to characters, mindset, predisposition, habits, adaptability, problem solving ability, decision making, stress management. These skills are acquired through nurture and bring-ups throughout lifetime (Songkeit Piyaka and associate, 2002, 16-17). Alcohol addicts tend to have anti-social personality, lack of adaptability, lack of people skills. They are not capable of coping with disappointment, stress, anger, and would feel worthless and sinful. (Prapai Thayayut, 2002, 8, Friend of Women Foundation Foundation, 2003, 15)

2.1.4.3 Social factors

Social and environmental factors play a significant part on alcohol consumption and dependence. They include influences from family, relatives, friends, nurture, cultures, nationality, religion, unemployment, poverty, conflict in partnership, work stress, children imitating adult behavior, or social drinking. It is described that alcohol consumption and dependence are a result of social experience. For example, children whose parents drink alcohol might develop drinking habits. These social experiences lead them to think that alcohol drinking is a norm. (Prapai Thayayut, 2002, 9, Songkeit Piyaka and associates, 2002, 16-17)

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It suggests that alcohol consumption and dependence is driven by many factors. Each factor interconnects with one another as depicted in the diagram below.

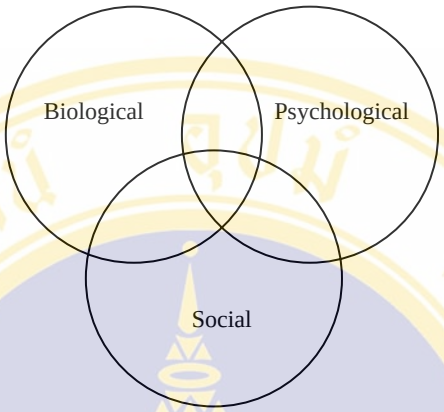

Figure 2. Factor interconnection between alcoholic consumption and dependence

2.1.5 Effects of Alcohol Consumption on the body

Alcohol is metabolized extremely quickly by the body. Unlike foods, which require time for digestion, alcohol needs no digestion and is quickly absorbed. About 20 percent is absorbed directly across the walls of an empty stomach and can reach the brain within one minute. The result of the study of blood alcohol levels in relation to changes in behavior and emotion of consumers has found that at the beginning stage of drinking, alcohol raises blood pressure and may trigger feeling of well-being, relaxation, lower inhibitions, and sensation of warmth. Higher levels of alcohol- 100-200 mg% results in impairs in nervous systems such as slow reaction time, impaired memory, Ataxia, in-coordination. At 200-300 mg%, the symptoms of alcohol intoxication are more obvious, except for heavy or frequent drinkers who are used to high level of alcohol in their systems. 400mg% or over will lead to onset of coma, possible death due to respiratory arrest. (Sompop Reungtrakun, 2003: 35).

2.1.5.1 Alcohol and brain

Alcohol affects brain directly. The common problems associated with alcohol are alcohol intoxication and alcohol withdrawal (Somsak Tiamkoa, 2006: 33)

1) Alcohol intoxication A person is said to suffer from alcohol intoxication when the quantity of alcohol the person consumes exceeds the individual's tolerance for alcohol and produces behavioral or physical abnormalities.

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In other words, the person's mental and physical abilities are impaired. The person can't function. (www.emedicinehealth.com)

Alcohol produces intoxication because of its depressive effects on various areas of the brain causing these impairments in a progressive order as the person gets more and more drunk.

Table 2 shows the effect of blood alcohol levels on the behaviors and symptoms of alcohol drinkers.

Number of drinks	Blood level	Symptoms
1	20mg%	Felling of well being , Relaxation
2.5	50mg%	Slight impairment of balance, speech, vision, reaction time, judgment and hearing
4	80mg%	Significant impairment of motor coordination and loss of good judgment. Speech may be slurred; balance, vision, reaction time and hearing will be impaired. Euphoria. It is illegal to operate a motor vehicle at this level of intoxication.
10	200mg%	Dysphoria, violence, aggressiveness
20	400mg%	Loss of consciousness, coma
30+	650mg%	Ultimately the shutdown of the respiratory centers (death)

Resource: (Songkiet Piyaka, Chanvit Ngeunsritrakul, Savithree Aksanakornchai, 2003: 85)

2) **Alcohol withdrawal** (Somsak Tiamkao, 2006: 35-36) When heavy or frequent drinkers suddenly decide to quit "cold turkey", they will experience some physical withdrawal symptoms -- which can range from the mildly annoying to severe and even life-threatening. The severity of these withdrawal symptoms is usually dependent upon how "chemically dependent" the chronic drinker has become. Those who drink heavily on a daily basis of course have developed a high level of dependency, but even those who drink daily, but not heavily and those who

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drink heavily but not daily, can also be chemically dependent upon alcohol (http://alcoholism.about.com).

Due to the depressive effects of alcohol on various areas of the brain, sudden alcohol quitting has the reverse effect, which is equivalent to stimulants to the brain and causes insomnia, confusion, anxiety, hallucination etc. The symptoms can be classified in to 3 categories as follows:

A. Autonomic hyperactivity, which happens within 24-48 hours. The symptoms including shaking, sweating, nausea, headache, anxiety, a rapid heart beat.

B. Seizure, which happens within 12-48 hours after quitting. The common seizure is Generalized tonic-clonic seizure (GTC), which is is a seizure involving the entire body, usually characterized by muscle rigidity, violent rhythmic muscle contractions, and loss of consciousness. The condition is caused by abnormal electrical activity in the nerve cells of the brain.

C. Delirium Tremens (DTS) within six to 48 hours after not drinking, hallucinations may develop. These usually are visual hallucinations but they can also involve sounds and smells. They can last for a few hours up to weeks at a time. The symptoms may progress to delirium tremens (DT's) after three to five days without alcohol. The symptoms of DT's include profound confusion, disorientation, hallucinations, hyperactivity, and extreme cardiovascular disturbances. Once DT's begin, there is no known medical treatment to stop them. Grand mal seizures, heart attacks and stroke can occur during the DT's, all of which can be fatal. (http://alcoholism.about.com)

2.1.5.2 Alcohol and digestive system

Alcohol affects digestive system such as stomach, rectum, liver, and kidney.

1) Alcohol and stomach

Stomach and intestine are the first organs to be affected by alcohol consumption as they are the first passage of alcohol into the bodily system. Alcohol has acid substance that can damage mouth tissues, pharynx, esophagus, and stomach. It can cause irritated stomach lining, bleeding from stomach ulcers,

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nausea, vomits. These symptoms often lead to malnutrition and an increase in the risk of cancer in stomach. (Songkiet Piyaka, 2004: 93)

2) Alcohol and small intestine

Alcohol causes irritation of the lining of the intestinal tract and colon. Chronic drinking may result in inflammation, ulcers and cancer of the intestines and colon. Nausea, diarrhea, vomiting, sweating and loss of appetite are common. Alcohol impairs small intestine's ability to process nutrients and vitamins.

3) Alcohol and pancreas

Alcohol poses significant risk of pancreatic and a chronic inflammation of the pancreas. It is found that alcohol is the cause of 40%-50% of acute pancreatic and 70%-80% of chronic pancreatic. (Supoj pongprasopchai, 2006: 43)

4) Alcohol and liver

Chronic heavy drinking may cause alcoholic hepatitis (inflammation and destruction of the liver cells) and then cirrhoses (irreversible lesions, scarring and destruction of liver cells).Liver cirrhosis in alcoholism found less than 10% (Songkiat Piyaka, 2004: 93). Impairs the liver's ability to remove yellow pigment and skin appears yellow (Jaundice). Liver damage causes fluid to build in extremities (Edema). Decreases production of blood-clotting factors; may cause uncontrolled bleeding. Liver accumulates fat which can cause liver failure, coma and death.

5) Alcohol and kidney

Alcohol may enlarge the kidneys, alters hormone functions, and increases the risk of kidney failure. (Chet Ratchadapunnathikul, Wanna Boonsrimuang, 2005: 21)

2.1.5.3 Alcohol and coronary heart system

Several studies have indicated that moderate drinkers have a lower risk of both nonfatal myocardial infarction and fatal heart disease than do abstainers. However, excessive alcohol consumption weakens the heart muscle and ability to pump (Cardiomyopathy). It may lead to heart enlargement, abnormal heart signs and irregular heart beat. As a result, it increases blood pressure, risk of heart

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attack and strokes and inhibits production of white and red blood cells. (www.gurney.co.uk)

2.1.5.4 Alcohol and body's metabolism

Alcohol can raises blood glucose (Hyperglycemia) and may lower blood glucose (Hypoglycemia), especially for people with diabetes. Alcohol is very rich in energy, containing 7 calories per gram. But like pure sugar or fat, the calories are void of nutrients. The more calories an individual consumes in alcohol, the less likely it is that they will eat enough food to obtain adequate nutrients. Heavy drinkers often tend to miss meals or lack adequate diets and therefore suffer nutritional imbalance and have an impaired immune system. Chronic alcohol abuse not only displaces calories from needed nutrients, but also interferes with the body's metabolism of nutrients, leading to damage of the liver, digestive system, and nearly every bodily organ. (Chet Ratchadapunnathikul, Wanna Boonsrimuang, 2005: 21)

2.1.5.5 Alcohol and immune system

Alcohol reduce immunity by decrease number of Phagocyte and Neutrophil . So the drinkers have a high risk of Pneumonia or other infections. (Chet Ratchadapunnathikul, Wanna Boonsrimuang, 2005: 21)

2.1.5.6 Alcohol and pregnancy

For the unborn child, the alcohol interferes with his ability to get enough oxygen and nourishment for normal cell development in the brain and other body organs. Research has shown that a developing fetus has very little tolerance for alcohol and infants born to mothers who drink during pregnancy can have serious problems. (www.alcoholism.about.com)

Fetal Alcohol Syndrome (FAS) is a pattern of mental and physical defects which develops in some unborn babies when the mother drinks excessive alcohol during pregnancy. The potential problems with newborns as a result of drinking during pregnancy include growth retardation, microcephaly, mental retardation, craniofacial anomalies. (Sarayut Bunchaipanitwattana, Nanthana Koawlaor, 2006: 21, www.pharm.chula.ac.th).

2.1.6 Other effects of alcohol consumption

Alcohol use generally is lawful and socially acceptable. Due to its depressive effects on the central nervous system and the brain, at the first stage of

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drinking, alcohol can render the feeling of well-being, relaxation. As the alcohol level is rising, the depressive effects will become more obvious causing sleepiness, impairment of balance, speech, vision, reaction time, and hearing, euphoria, reduced judgment and self- control.

Recent studies show that moderate use of alcohol may have a beneficial effect on the coronary system. In general, for healthy people, one drink per day for women and no more than two drinks per day for men would be considered the maximum amount of alcohol consumption to be considered moderate use. “Healthy” people refer to non-pregnant women, individuals not addicted to alcohol, and people without pre-existing medical conditions, among others. However, the amount of alcohol that a person can drink safely is highly individual, depending on genetics, age, sex, weight and family history, etc (Sawittee assadangkornchai, 2004: 43).

Alcohol consumption problems usually result from chronic and heavy alcohol consumptions causing brain damage, especially in the reward system and impairments in intellectual functions and other organs.

Alcohol is an addictive substance. Alcohol consumption can lead to both physical and psychological additions.

Physical dependence on alcohol is when a person's body actually becomes dependent on alcohol, which normally occurs in heavy chronic drinkers. It also means that a person builds ‘tolerance’ to the substance, so that person needs a larger dose than ever before to get the same effects. When a person who is physically addicted stops using alcohol, he or she may experience ‘withdrawal’ symptoms. It is found that 5% of alcoholics experience severe symptoms of alcohol withdrawal.

Psychological dependence on alcohol may occur with regular use of even relatively moderate daily amounts. It may also occur in people who consume alcohol only under certain conditions, such as before and during social occasions. This form of dependence refers to a craving for alcohol's psychological effects, although not necessarily in amounts that produces serious intoxication. For psychologically dependent drinkers, the lack of alcohol tends to make them anxious and, in some cases, panicky.

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Alcohol abuse can take a negative toll on people's lives, leading to violence or a deterioration of personal relationships. Alcoholic behavior can interfere with school or career goals and lead to unemployment. (www.alcoholism2.com)

2.1.6.1 Effects of alcohol consumption on body and health

1) Physical health

Short-term effects

Alcohol suppresses the part of the brain that controls judgment, resulting in a loss of inhibitions. It also affects physical co-ordination, causing blurred vision, slurred speech and loss of balance. Drinking a very large amount at one time (binge drinking) can lead to unconsciousness, coma, and even death. Vomiting while unconscious can lead to death by asphyxiation (suffocation). Alcohol is implicated in a large proportion of fatal road accidents, assaults and incidents of domestic violence.

Long-term effects

Alcohol can be a dangerous drug. Drinking too much too often will cause physical damage, increase the risk of getting some diseases, and make other diseases worse. Excessive drinking over time is associated with:

Loss of brain cells,

Liver failure,

Irritated stomach lining and bleeding from stomach ulcers,

High blood pressure (which can lead to stroke),

Certain types of cancer,

Nerve damage,

Heart failure,

Epilepsy.

Excessive drinking has also been linked to:

Vitamin deficiency,

Obesity,

Sexual problems

Infertility,

Muscle disease,

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Skin problems,

Inflammation of the pancreas.

2) Mental health and psychological effects

Although alcohol initially makes people feel relaxed, long term excessive use can ultimately increase anxiety and cause depression. It is also related to problems with sleeping, mood swings, violence and suicide (about two-thirds of suicide attempts are thought to involve alcohol).The psychological effects of alcohol intoxication include lack of inhibitions, increase in aggression and violence, uninhibited sexual behavior/lack of interest in sex, mood swings, depression, impaired memory and sensory-motor co-ordination. (www.health24.com) On the other hand, the psychological effects of alcohol withdrawal include profound confusion, disorientation, hallucinations, hyperactivity, and extreme cardiovascular disturbances, which usually occur in the Delirium Tremens stage.

Long-term alcohol abuse can be very damaging to one's physical and mental health. The research has identified subtle but important brain changes occurring among adolescents with Alcohol Use Disorder (AUD), resulting in a decreased ability in problem solving, verbal and non-verbal retrieval, cognitive skills, and working memory. Brain damage can occur as a result of a vitamin B2 deficiency. A well-known condition, Karsokov's syndrome, is an amnesic disorder which means that people find it difficult to remember past events and to learn new things. Along with the decline in cognitive skills, sometimes noticeable personality changes take place. Personality changes include:

Frustration, Anger, and Irritability

Emotional inability, unstable moods

Paranoia, Suspicion, and Jealousy

Insensitivity to Others

Flat Emotional Responses

Loss of Inhibitions

Fear of Being Alone

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All these personality changes are not only warning signs of possible alcoholic dementia, but also the factors contributing to deterioration in the relationship and domestic violence as it triggers jealousy, suspicion, and conflicts between couple. (http://alcoholism.about.com).

According to the study of WHO, it has found that one third of the mentally-ill patients in each country around the world are caused by the toxin derived from the metabolism of alcohol in the body called 'Tetrahydroisoquinolene'. This Toxin destroys the chemicals in the brain that promote calmness and peace in the person's mind, therefore alcohol dependants are usually emotionally sensitive, less tolerant to stress and pressure and unable to concentrate, which lead to deterioration in personality. Men and women who drink chronically over 5 years are likely to develop mental illness, which can be difficult to treat. Most alcohol dependants experience stress, depression, suicidal thoughts, and murder thoughts. (Friends of Women Foundation document, 'Men quitting alcohol': 14)

Forty-seven percents of alcoholic dependants are believed to develop mental illness complications, which occur more often in female than male (Songkiet Piyaka and associate, 2002: 93). The common mental problems associated with alcohol are as follows

Affective disorder, especially depression

Anxiety disorder, often found in alcohol withdrawal

Personality disorder, especially anti-social personality disorder, often found in adolescent alcoholics

Alcoholic hallucination disorder

Alcoholic Amnesic Disorder

Alcoholic Dementia

2.1.6.2 Effect of alcohol consumption on family

Family is a social unit most affected by alcohol consumption of family members as a result of an increase in expenses, domestic violence, deterioration in family relationship, including impaired work performance.

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1) Increasing expenses

Alcohol creates unnecessary financial burdens for families in terms of alcohol expenses and medical expenses associated with alcohol-related illness and accidents, especially in the family with chronic drinkers or severe alcohol dependants. The bad financial situations often lead to stress and domestic violence.

2) Domestic violence

Families in which parents or other family members are dependent on alcohol are often unable to find peace and happiness as alcohol causes lack of self control, emotional sensitivity and instability, violent behavior. The subsequent problems are conflicts between couples, arguments, jealousy delusion, and verbal and physical assaults. Children are directly affected by domestic violence, which often creates fear and anxiety when domestic fights occur, confusion in family situations, low self esteem, and insecurity in love from parents. Affected children might show the symptoms such as headache, stomachache, insomnia (or having difficulty in sleeping), depression. Adolescents whose fathers are alcoholics are 11.5 times more likely to develop mental health problems. (Friends of Women foundation document: Men quitting alcohol, 14). In addition, it is found that this group of children absorbs violence from domestic experience and later develops deviant and anti-social behaviors. They have high tendency to become alcohol dependants and involved in criminal acts. (Avatsada Chansantoa, 1998: 21 and Donnapa Hongthong, 1999: 121)

The study has found that women whose husbands drink alcohol have 75.8% rate of domestic violence, compared with 10.7% in women whose husbands do not drink alcohol. This is corresponding to the study of the effect of alcohol on the rate of domestic violence by Bunserm Huthapaet (2003: 58), which found that some people in the sample group admitted that their alcohol consumption triggered anger, violence, and lack of self control. Subsequently, they assaulted people close to them such as wives and children both verbally and physically.

3)Deterioration of family relationship

Families with parents (father or mother) who are dependant on alcohol experience physical and mental deterioration. Alcohol withdrawal symptoms include anxiety, violence, constant obsessive thought about

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drinking, which can lead alcohol dependants to neglect work, family, wives, and children. Alcohol intoxication often triggers anger, lack of self control and rationale and domestic violence. The relationship within family falls off directly as a result of alcohol dependence. Songkeit Piyaka (2004: 99) indicated that those who are not necessarily dependent on alcohol, but prefer to spend time for drinking are doing it at the cost of family relationship as they tend to spend less time with family

4) Impaired performance at work

Alcoholic behavior can interfere with school or career goals. Alcohol impairs self control, decision making, and judgmental abilities, which lead to inefficiency, unproductiveness, high error rate, lack of work commitment, absenteeism, and eventually unemployment. Refer to the study of Liska (1981 cited in Shives, 1986 referred in Awatsada Chansantoa, 1998: 21) reviews that alcohol dependants have high rates of absenteeism, work-related accidents, job turnover and low level of work performance as a consequence of alcohol consumption.

2.1.6.3 Effect of alcohol consumption on society

Alcohol consumption has a direct impact on society causing various social problems. The common problems associated with alcohol consumption are accidents, crimes. It can lead to other substance abuses and uninhibited sexual behavior. Alcohol affects the brain, resulting in a decreased ability in problem solving, verbal and non-verbal retrieval, cognitive skills, working memory, and slow reaction. Therefore, alcohol consumption is often the cause of accidents at workplace, road and traffic accidents, claiming damages to life and property. As shown in the statistics, alcohol consumption correlates directly with the occurrence of accidents. The statistics of road traffic in Thailand from Royal Thai Police found that between 2000 to 2004 the number of road accidents related to alcohol consumption had dramatically increased from 1,811 cases in 2000 to 9,279 cases in 2004- increasing to 5 times in 4 years. (Bandit Sornpaisarn, 2006: 59)

In respect of criminal problems, the study shows that autopsy after murder and blood examination of perpetrators often found alcohol substance in the body. Alcohol consumption is one key element in nearly 60% of murder cases. (Songkiet Piyaka, 2004: 98)

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Alcohol consumption is also a cause of domestic violence, which often usually in form of arguments, verbal and physical assaults, leading to broken relationship and divorce. This has become serious social phenomenon. It can be described that alcohol consumption is a key factor that leads to domestic violence. The study found that two third of domestic violence victims and three quarter of perpetrators consume alcohol. (Friends of women foundation, 2003: 20). According to the research of Vichai Posayajinda and associates (2002: 131), 6.2% of husbands who are regular alcohol drinkers committed physical assaults against their wives and 5.5% of women who drink alcohol are at risk of being assaulted by their husbands and other family members. Another study (Ronchai Kongsakon, 2005: 50) reviews that families with alcohol consumption are 3.84 times more likely to have domestic violence than families without alcohol consumption.

Mckenry (1950: 307-318) studied the relationship of alcohol consumption and partner assaults. It is found that 25%-85% of domestic assaults were caused by alcohol consumption.

The sample cases of domestic violence from the service of 'Women's rights protection' foundation in 2006- both civil and criminal cases are as follows:

Case 1: a wife 40 years old, who is a retailer, finished year 12 and is married to a business owner. The husband drinks alcohol regularly and often verbally abuses the wife. She now moved out of the house as he used to promise not to assault her but later continued to assault her both verbally and physically. She is still deciding whether to file the divorce.

Case 2: The victim is female, 27 years old; the offender is her ex-husband, 35 years old, and solicitors with non-regular income. They have 1 child aged 5 months. On 6 November 2005, she got physically assaulted due to his jealousy. He drinks alcohol everyday. She has filed the divorce.

It is clear that alcohol consumption not only affects drinkers, but also affects people close to them, especially family members causing constraint in family and domestic violence, divorce and other social problems.

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2.2 Theories of domestic violence

Family is the basic social unit and plays an important role in building a good and stable society. Family usually needs to have rules to govern and give direction to its family members, including defining the roles and the relationship among family members- how to interact with one another to live together happily. Each member needs to know their own roles, comply with the family rules, and have proper interactions within the family in both behavioral and emotional aspects. As a result, the family is in balance without domestic violence.

2.2.1 Definition of family

The National Women's support and coordination committee defines family as the group of people emotionally and psychologically interconnected, living together, including socially and economically dependent, legally tied or tied by blood. There could be some exceptions in some families. (Sirirat Kupthivut, 2002: 3)

According to Burgess and Lock (1971: 6 cited in Supatra Suparp, 1991: 65-66), family represents people living together by ties of marriage, blood or adoption, thus representing a single household. Family members may live together in one household or may sometimes live separately. However, family is a social unit in which there are social interactions among family members and there are sets of rules for each family that define the roles of its family members. The social interactions within family include loving, caring, sharing, teaching, connection, cultural heritage, in which family members exchange behavior patterns.

The characteristics and the relationship in family can be classified in many ways in accordance to family governance and heritage. A common family pattern is 'nuclear family' comprising husband, wife, and children living away from other relatives. On the other hand, 'extended family' is a family that includes three or more generations. Normally, that would include grandparents, their sons or daughters, and their children. (Schlesinger 1979, Miermont 1995: cited in Umaporn Trungkasombut, 2001: 6).

The connectedness in family consists of behavioral connectedness and emotional connectedness as follows:

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1. Behavioral connectedness

According to Bateson (Sirirat Kupthivut, 2002: 33), family relationship can be classified into 3 patterns. The first pattern is ‘complementary relationship’, in which one person has more power or superiority that the other. For example, a husband may think that he is smart and can get along with children well, while he sees his wife as incompetent. The second pattern is ‘symmetrical relationship’ can occur either when they both support each other or when there are argumentative/ violent behaviors involved in which each person try to be superior to the other. The third pattern is reciprocal relationship, which involves the first and the second patterns in which each take turn to represent superiority to the other.

2. Emotional connectedness

Minuchin (1974 cited in Sirirat Kupthivut, 2002: 35) classifies the relationship in family into 2 patterns. The first pattern is family enmeshment, which represents close, caring, interconnected relationship such as the relationship between mothers and babies. The other pattern is family disengagement in which family members tend to be non-responsive to changes that happen to other family members. Every member is self-dependent and disregards other member’s feeling or reaction. Members in this type of family are likely to demonstrate inappropriate behaviors such as delinquency or suicidal attempt.

2.2.2 Definition of domestic violence

WHO (1995) defines violence as ‘the intentional use of physical force or power, threatened or actual, against oneself, another person, or against a group or community, that either results in or has a high likelihood of resulting in injury, death, psychological harm, mal-development or deprivation’.

The definition of “domestic violence”, according to the domestic violence victim protection Act, Thailand, Section 3 is any acts aiming to cause physical and psychological harm or any intentional acts that are likely to cause harm to the body, mentality, or health of family members or the intentional and illegitimate use of physical force or power to make family members do things or refrain from doing things, however not including negligent acts.

Other definition of domestic violence are as follows:

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Violent behavior directed by one member of a household against another. (www.elissetche.org/dico/D.htm)

Any hurtful or unwanted behavior perpetrated upon an individual by an intimate or prior intimate. Includes physical, psychological and emotional abuse. Primarily a learned behavior whose effects, without intervention, become more destructive over time. (www.turnaroundinc.org/pages/facts/glossary.html)

Emotional, psychological, physical, sexual, or economic abuse that one person in an intimate relationship uses in order to control the other. (sexualassault.rutgers.edu/crimedefs.htm)

According to the Commonwealth's Partnerships against Domestic Violence (PADV) website, domestic violence occurs when a family member, partner or ex-partner attempts to physically or psychologically dominate or harm the other. Domestic violence can be exhibited in many forms, including physical violence, sexual abuse, emotional abuse, intimidation, economic deprivation or threats of violence.

2.2.3 Types of domestic violence

There are 3 types of domestic violence as follows:

2.2.3.1 Intimate partner Violence

WHO reviews that women often become victims of violence, especially by their own family members, including husband, partner, or ex-partner. The violence is often in form of physical, sexual, psychological abuses and vandalization. (WHO, 1997, cited in Pasuree Iantim, 2005: 15)

According to the survey in USA in 1985, it found that 6.3% or 3,400,000 married couple had been involved in the strong level of domestic physical assaults. 1 in 8 husbands would assault his wife at least once a year and 3 in 100 wives would get bashed by their husbands severely. Furthermore, it found that 5 in 100 wives would assault their husbands in order to protect themselves or to revenge the husbands. However, the extent of injuries to husbands caused by wives was substantially less serious than injuries to wives triggered by husbands. (Strauss and Gelles 1990, cited in Umaporn Trangsombut, 2001: 245). Most incidences of domestic violence often go unreported as family members tend to cover them up and keep them from outsiders due to the sense of disgrace and social values and cultures that see

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domestic violence as a private family matter that should be privately dealt within families and that it is shameful to review private family matters to outsiders. In respect of sexual abuse, it is estimated that only 2% of sexual abuse incidents that occurred in family were reported. (National Center on Child Abuse and Neglect 1980, cited in Umaporn Trangsombut, 2001: 245)

2.2.3.2 Child abuse

Child abuse is the physical or psychological mistreatment of a child by his or her parents (including adoptive parents), guardians, or other adults. (Gelles, 1993 cited in Phsuree Iantim, 2005: 15). Child abuse is common in Thailand, particularly in the low socioeconomic group, in which they tend to punish their children physically, rather than explain with the reasons. The study shows that 17% of adolescents who had committed crime had been severely punished by their parents such as kick, punch, bashing. The study also reviews that 50% of sexually abused children had been molested by their own fathers or stepfathers (Umaporn Trangsombut, 2001: 246)

2.2.3.3 Elderly abuse

Elder abuse is a single or repeated act or lack of appropriate action, occurring within any relationship where there is an expectation of trust, which causes harm or distress to an older person. (en.wikipedia.org/wiki/Elder_abuse). Elder abuse is often committed to the elderly by their own children. In USA, it is reviewed that 2 in 100 elderly people aged 65 or over had experienced physical assaults in any forms such as pushing, slap, bashing, kick, punch. (Pillemer Finkelhor, 1998, cited in Umaporn Tranksombut, 2001: 245).

2.2.4 Extents of domestic violence

Violence is an act of aggression that that cause or intend to cause injury to people, animals, or non-living objects, resulting in fear and insecurity to victims. Kevin & Herbert (1997 cited in Yaowaret Vorasitakankun, 2001: 10-11) classify violence into 3 types as follows:

2.2.4.1 Physical abuse Physical abuse involves using force or any tools as a weapon causing victims physical injuries. Injuries can be minor or severe or causing death. Violent acts range from pushing, slapping, pinching, pulling hair,

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throwing things, hitting to the very strong level of violence such as strangling, kicking, punching, poisoning, drowning,

2.2.4.2 Psychological abuse Psychological and emotional abuse involves a serious mistreatment of another person's feelings or emotional needs causing sadness, trauma, fears, disgrace, depression, humiliation, intimidation or loss of freedom. Violent acts include swearing, using coarse language, yelling, shouting, verbal insults, threatening, or emotional abuse such as refusing to talk to, committing infidelity/ adultery, and willful neglect in raising children.

2.2.4.3 Sexual abuse Sexual abuse is described to involve both physical and emotional abuses such as verbal sexual harassment, forcible fondling, rape, or ignoring wives' sexual needs.

Straus (1979, cited in Punchalee Chodthikut, 1998: 8-9) classifies the level of violence into 3 categories as follows:

1. Psychological abuse involves hurting other's feeling verbally such as swearing; using coarse languages; verbal insulting; humiliating; intimidating; ignoring; storming out of the house; crying; yelling etc

2. Intention to harm or assault resulting in fear and insecurity for others such as threatening to revenge; threatening to beat up or to throw things at the victims (but no objects/ items in hands); pushing, pulling, and vandalizing objects.

3. Physical abuse involves using force or any tools as a weapon causing others physical injuries such as pushing, dragging, slapping, kicking, beating, punching, threatening by weapon, or using weapon to cause injuries that require hospital attention or cause death.

Stets (1990) studied violence in married couples in terms of psychological and physical abuses. The study reviewed that 80% of women committed psychological abuse against their partners, compared with 75% for men. In respect of physical abuse, 12% of women committed the offence, compared with 10% for men.

People's experiences of domestic violence can often follow a pattern known as the **Cycle of Violence.** However not everyone's experiences are the same. Sometimes a 'phase' does not occur, or two or more 'phases' can occur simultaneously.

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The **tension build up phase** is when tension begins to build. In a non-violent relationship, these tensions can often be resolved. In a domestic violence situation, this build up phase usually leads to a **stand-over phase**, where the violent partner uses both their strength and their belief in their 'right' to dominate, in order to control and put down their partner. This then leads to the **explosion phase (or serious battering incident phase)** when the violence (physical/sexual/emotional) occurs.

Afterwards the perpetrator can enter the **remorse phase** where they feel ashamed of what has happened, or they may be afraid of the consequences. They may also try to justify or minimize their actions by claiming that "she made me do it", or "it was only a little slap". This can then lead to the **pursuit phase** where the abusive partner can try to win back their partner with gifts and promises. Or they can act helpless, saying such things as "I can't live without you", or "I'll kill myself". If these tactics do not work, they can also revert to the use of more threats and violence.

This then leads to the **honeymoon phase** where the relationship appears to be working- the 'incident' is forgotten and no abuse is taking place. However nothing is resolved and it is only a matter of time till it progresses to a build up of tension, which leads to another stand over and explosion of violence and so on. (www.freofocus.com). Violent incidents are likely to increase in frequency and level of violence as women still stay in the violent relationship. The tension build up phase will be shortened each time violence occurs. (Walker as cited in Keltner, Schwelke & Boston, 1995)

Finkelhor (1982 cited in Vilasinee Pananakornsap, 2002: 17) explained that repetitive cycle of violence occurs as women think that they still love their husbands and vice versa. The assaults are as a result of the love they have for each other. In addition, some women think that violence will stop if they behave themselves better such as being a good housewife and good mother, not aggravating her husband. Therefore, leaving violent relationship can be difficult for women as they are emotionally tied with their partners.

It can be concluded that family is a social unit which is prone to conflicts and potentially can develop into violence. Family members are living together under the same household rules, which define the roles of each member. Any wrongdoings by the family members usually have significant impact on

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other members. Some activities may cause conflict of interest among each member. Some members may attempt to dominate and alter other members' behaviors to be in line with their goals. Family crisis such as unemployment also contribute to high stress level.

Domestic violence is acceptable in the society to some extent. The common domestic violence includes parents smacking children, husband and wife fighting each other and the society often view that domestic altercations or domestic violence are private family matters that should be privately dealt within family. Also, the traditional police proceedings in Thailand usually aim for mediation methods between a couple rather than proceeding as per normal legal procedures (Straus, 1980: 15-18).

2.2.5 Factors contributing to domestic violence

2.2.5.1 Beliefs, values, and cultures

According to a traditional patriarchal model of society and of the family, women have lower status than men and men have more power and are legitimate to control women and children. Traditionally, the society defines the roles of women as a mother who gives birth to children, as a wife responsible for raising children and taking care of the elderly. The roles of men include being the head of the family, supporting family financially. There are beliefs that men can use violence as a way to solve family conflicts and good wives need to be patient and keep family conflicts and problems as a secret. Women are told that family conflict is a private issue that should be dealt within family and not to involve outsiders. Most people also see that domestic altercations between husband and wife are normal in the society and they should not get involved as they are outsiders. Therefore, when there is domestic violence, women often get isolated from social help; as a result women in violent relationship experience depression, trauma, stress, or even suicide attempts.

2.2.5.2 Individuals Involved

Abnormality of mentality and personality such as mental health problems can trigger violent, anti-social acts and lack of self control. The mental and personality problems can be as a result of substance abuse such as alcohol, traumatized experience in violence in childhood, stress from work, unemployment, bankruptcy. All these conditions can lead to stress and altercations in family.

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2.2.5.3 Family, social, media

Marital not readiness of couples related to family formation, misconceptions, no knowledge of sex and contraception, no parental skills, financial problems, communication breakdown can put family members into distress situations.

Due to the changing society, materialism and capitalism affect the way of people's life. People tend to be more materialistic, overspending and eventually fall into debt spirals, which can cause stress and domestic violence.

Media is a significant factor that stimulates learning and perception of violence. Mass media presentations that often glamorize violent acts, but rarely show their consequences, serve to normalize violence and desensitize people's response to it. The underlying message is that violence is a legitimate strategy for solving problems. Dr. Delbert Elliott of The Center for the Study and Prevention of Violence, concludes, "What is learned is not only how to do violence, but desensitization to violence and rationalizations for disengaging one's moral obligations to others." There is also a pervasive problem in the way in which women are portrayed in all levels of the media. Sexist stereotypes of women as victims, as passive, as "enjoying" or even deserving of abuse-and sexist stereotypes of men as aggressive, unemotional, more intelligent and valued members of society who solve problems primarily by force-feed into a climate in which it is permissible to batter women. (www.sayno.com)

2.2.5.4 Alcohol consumption

Abuse of alcohol is a contributing factor to violence. Alcohol, the number one drug associated with violence. The presence of alcohol reduces an individuals' ability to make rational decisions and identify dangerous situations, while increasing the likelihood of impulsive and high-risk responses to potentially violent situations. These behavior changes also make it more likely that the protagonist will become either a perpetrator or victim of a violent act. According to James Mosher, J.D., Research Fellow, Marin Institute for Alcohol and Other Drug Problems, over one-half of the inmates in California state prisons convicted of violent crimes used alcohol just before committing the violent offense. (www.sayno.com). Alcohol abuse can take a negative toll on people's lives, leading to violence, crime, road and other accidents or a deterioration of personal relationships. Alcoholic behavior can interfere

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with school or career goals and lead to unemployment. Alcohol consumption has been linked to more that 60 diseases and illness such as heart and coronary diseases, alcoholic hepatitis, and cancers.

The researches overseas have also found that 19.2% of husbands who consume alcohols commit physical assaults against their partners. The rate of physical assaults is 3 times higher than husbands who do not consume alcohols. It is estimated that around 1 in 4 of domestic assaults occurred after husbands had consumed alcohols. (Kentor and Straus, 1990 quoted in Ward, 1994: 286, cited in Friend of Women's Foundation and Bunsirm Hutapaet, 2003: 3).

Families with parents (father or mother) who are dependant on alcohol experience physical and mental deterioration. Alcohol withdrawal symptoms include anxiety, violence, constant obsessive thought about drinking, which can lead alcohol dependants to neglect work, family, wives, and children. Alcohol intoxication often triggers anger, lack of self control and rationale and domestic violence. The relationship within family falls off directly as a result of alcohol dependence.

2.2.6 Theories and approaches in explaining domestic violence

In the study of domestic violence related to alcohol consumption, the researcher has reviewed the previous literature and research. There are 3 prevalent approaches to analyze and describe domestic violence- that is psychological approach, sociological approach, and feminist approach.(Gelles and Loseke, 1993: 7-47)

2.2.6.1 Psychological approach

This theory focuses on not so much mental illness, but on psychological predispositions in both the violent person and the victim": the offender is characterized, typically, as jealous, excessively dependent and overly possessive; the victim is said to be depressed, excessively dependent and insecure. A further elaboration of this psychological approach suggests that violence at the home is a behavior which is learned, in childhood, from a violent home. Those who have been subjected to or who have witnessed violence in childhood are predisposed to being violent adults. So also, victims of childhood violence become conditioned to be victims and gravitate towards a violent mate. This theory is to some extent controversial. (Snell, J.E, Rosenwald R.J., Franingham, M. 1964: 11)

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2.2.6.2 Sociological Approach

A sociological approach tends to go for a macro level of analysis and uses social structure as the driver behind the violence. It focuses on social contexts and norms which influence the likelihood of domestic violence. In this theory, domestic violence victims can be either male or female.

2.2.6.3 Feminist Approach

This theory suggests that violence by males against females is an expression of a traditional patriarchal model of society and of the family. It focuses on the fact that perpetrators of domestic violence tend to be male and victims tend to be female.

In this research, the researcher studies the pattern of alcohol consumption on domestic violence, not specifically focusing on either wives or husbands only. Therefore, psychological and sociological approaches would be used in the analysis of this study. The relevant theories include personality theory, social learning theory, and self control theory.

1. Personality Theory

The structure of the personality in psychoanalytic theory is threefold. Freud divided it into the id, the ego, and the superego. Only the ego was visible or on the surface, whiles the id and the superego remains below, but each has its own effects on the personality, nonetheless.

The id represents biological forces. It is also a constant in the personality as it is always present. The id is governed by the "pleasure principle", or the notion of hedonism (the seeking of pleasure). Early in the development of his theory Freud saw sexual energy only, or the libido, or the life instinct, as the only source of energy for the id. It was this notion that gave rise to the popular conception that psychoanalysis was all about sex, sex, sex.

The ego is the surface of the personality, the part you show the world. The ego is governed by the "reality principle," or a pragmatic approach to the world. For example, a child may want to snitch a cookie from the kitchen, but will not if a parent is present. Id desires are still present, but the ego realizes the consequences of brazen cookie theft. The ego develops with experience, and accounts for developmental differences in behavior. For example, parents expect 3-month infants to

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cry until fed, but, they also expect 3-year-olds to stop crying when told they will be fed.

The superego consists of two parts, the conscience and the ego-ideal. The conscience is the familiar metaphor of angel and devil on each shoulder. The conscience decides what course of action one should take. The ego-ideal is an idealized view of one's self. Comparisons are made between the ego-ideal and one's actual behavior. Both parts of the super-ego develop with experience with others, or via social interactions. According to Freud, a strong super-ego serves to inhibit the biological instincts of the id, while a weak super-ego gives in to the id's urgings. Further, the levels of guilt in the two cases above will be high and low, respectively.(http://peace.saumag.edu/faculty/Kardas/Courses/GPWeiten/C12Personality/EgoIDSuper.html)

The interaction of id, ego, and superego serves as an indicator of the personality. If id is relatively strong, the personality will exhibit selfishness and immaturity. If ego is relatively strong, that person will be sensible. If super ego is relatively strong, that person tends to be an idealist

According to Sigmund Freud, all humans have natural drives and urges repressed in the unconscious. Furthermore, all humans have criminal tendencies. Through the process of socialization, however, these tendencies are curbed by the development of inner controls that are learned through childhood experience. Freud hypothesized that the most common element that contributed to criminal behavior was faulty identification by a child with her or his parents. The improperly socialized child may develop a personality disturbance that causes her or him to direct antisocial impulses inward or outward. The child who directs them outward becomes a criminal, and the child that directs them inward becomes a neurotic.

Alcohol consumption can cause personality change and disturbance such as becoming more aggressive and jealous, which often lead to domestic altercations involving verbal and physical abuse.

2. Social learning theory

Edwin Sutherland (1883-1950) proposed **Differential Association (DA)** theory. Differential association is a theory based on the social environment and its surrounding individuals and the values those individuals gain

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from significant others in their social environment. Differential Association is based upon these nine postulates:

1. Criminal behavior is learned.

2. Criminal behavior is learned in interaction with others in a process of communication.

3. Learning criminal behavior occurs within primary groups (family, friends, peers, their most intimate, personal companions)

4. Learning criminal behavior involves learning the techniques, motives, drives, rationalizations, and attitudes.

5. The specific direction of motives and attitudes is learned from definitions of the legal codes as favorable or unfavorable.

6. A person becomes a criminal when there is an excess of definitions favorable to violation of law over definitions unfavorable to violation of law. (this is the principle of differential association)

7. Differential associations vary in frequency, duration, priority, and intensity (frequent contacts, long contacts, age at first contact, important or prestigious contacts)

8. The process of learning criminal behavior involves all the mechanisms involved in any other learning....

9. Although criminal behavior is an expression of general needs and attitudes, criminal behavior and motives are not explained nor excused by the same needs and attitudes (criminals must be differentiated from no criminals)

According to Differential Association, criminal behavior is learned based on the interactions we have with others and the values that we receive during that interaction. We learn values from family, friends, coworkers, etc., Those values either support or oppose criminal behavior. Sutherland also noted that individuals with an excess of criminal definitions will be more open to new criminal definitions and that individual will be less receptive to anti-criminal definitions. The theory does not emphasize who one's associates are but rather upon the definitions provided by those associations. Once techniques are learned, values (or definitions) supporting that criminal behavior may be learned from just about anyone. (http://home.comcast.net)

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Akers (1985) developed **Differential Reinforcement** Theories which dropped Sutherland's point that learning criminal behavior takes place in primary groups (Burgess & Akers 1968). Differential reinforcement theories, as they were called, tried to incorporate the psychological principles of operant conditioning, and held that even nonsocial situations (such as the physical effects of drug use) could reinforce learning criminal behavior. In sociology, there's also a group of theories called differential identification, which deal with imaginary, or comparative reference groups as influential in perceiving deviance as respectable.

According to Akers (1985), people are first indoctrinated into deviant behavior by differential association with deviant peers. Then, through differential reinforcement, they learn how to reap rewards and avoid punishment by reference to the actual or anticipated consequences of given behaviors. These consequences are the social and nonsocial reinforcements that provide a support system for those with criminal careers or persistent criminality. Structural conditions affect a person's differential reinforcements. Criminal knowledge is gained through reflection over past experience. Potential offenders consider the outcomes of their past experiences, anticipate future rewards and punishments, and then decide which acts will be profitable and which ones will be dangerous. To get to the point where criminal behavior is activated by discriminative cues (norms), the whole process follows seven stages:

1. Criminal behavior is learned through conditioning or imitation.

2. Criminal behavior is learned both in nonsocial reinforcing situations or nonsocial discriminative situations and thru social interaction.

3. The principal components of learning occur in groups.

4. Learning depends on available reinforcement contingencies.

5. The type and frequency of learning depends on the norms by which these reinforces are applied.

6. Criminal behavior is a function of norms which are discriminative for criminal behavior.

7. The strength of criminal behavior depends upon its reinforcement.

This theory has been tested fairly successfully on teenage deviance such as tobacco, drug, and alcohol use (Akers et al. 1979). It tends to explain 50-60%

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of the differences between users and abstainers using measurement items like: perceptions of actual or anticipated praise or absence of praise; and the total good things felt from deviance minus the total bad things felt. Differential reinforcement theory tends to fit well with rational choice theory because they both explain the decision making process involved in developing the motivation, attitudes, and techniques necessary to commit crime. It can explain solitary offending (since learning is sometimes solitary). Like all learning theories, it claims to be a general theory of crime. (http://faculty.ncwc.edu/TOConnor/301/301lect10.htm)

Social learning theory can explain the behavior of domestic violence. Past experience of an individual in being subject to domestic violence or witnessing domestic violence in childhood can reinforce the attitude that violence is a norm and the way to solve conflicts. He will learn and adapt violent behaviors exhibited by his parents and later on in his adulthood he is likely to apply the same violent approach to his wife and children due to his value and attitude towards violence.

3) Self control theory

Gottfredson and Hirschi strayed from Hirschi's previous theory that continuing social bonds cushion against criminal behavior in favor of the proposition that self control, internalized early in life, determines who will be likely to commit crime (Grasmick et al., 1993: 7). Children with behavioral problems will tend to grow into juvenile delinquents and eventually into adult offenders (Gottfredson and Hirschi, 1990: 155). Because the path toward or away from crime commences early in life, they contended further that the level of self-control depends on the quality of parenting in a child's early years. The theory purports that parenting is the most important factor which will determine one's level of self-control. If a child has an abusive or neglectful upbringing, he will tend to be impulsive, insensitive, physical (as opposed to mental), risk-taking, short-sighted, and nonverbal, and they will also tend to engage in the analogous criminal acts (Gottfredson and Hirschi, 1990: 90). Children whose parents care about them and supervise and punish their misconduct will develop the self-control needed, through socialization, to resist the easy temptations offered by crime. This will help them in future school, work, and relationships.

Self-control theory argues that a lack of self-control is neither a sufficient nor a necessary condition for crime to occur, because other properties of

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the individual, or of the situation may counteract one's likelihood of committing deviant acts (Hirschi and Gottfredson, 1993: 53). The theorists have implicitly stated that "their perspective, unlike many others, is not meant to predict any single type of activity since most deviant behavior, by its very nature, is impulsive and opportunistic. Therefore, everything else being equal, low self-control and a weak bond to society should positively and significantly predict a variety of deviant and criminal conduct" (Polakowski, 1994: 62). Though lack of self-control and the family's role in its failed development do not mean that one will unequivocally become deviant, it will provide circumstances that will make conditions favorable for delinquency. (http://www.criminology.fsu.edu/)

Alcohol consumption results in personality change and lack of self control, fueling arguments and physical violence as shown below in the diagram.

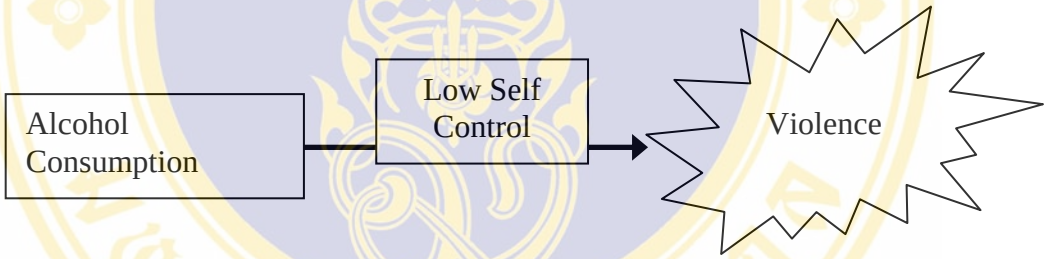

Figure3. Alcohol Consumption and Violence

2.3 Relevant research

Punchalee Chothikun (1998: 100-101) studies violence against the partners in the sample group- 321 Thamasart personnel who are married. Collect data from questionnaire. It is found that psychological abuse is used the most by this sample group, followed by physical abuse and attempt to do physical harm. Women tend to use psychological abuse more than men.

Awatsada Chansangtoa (1998: 57-60) studies the contributing factors and the effect of alcohol dependence of 7 women in Cheangmai community. Using interview guide and voice record. The respondents are women who are dependent on alcohol. It reviews that the contributing factors include unhealthy family relationship in childhood, family background and history in alcohol consumption. The main factors that drive women to consume alcohol and become dependent on alcohol are life crisis,

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family financial problems, and environments influencing and supporting alcohol consumption. The effects of alcohol dependence in women include alcohol-related health problems, suicide attempts, impaired work performance, increased expenses and debts, deterioration of relationship in family and neighbors.

Kamonporn Paitcheep (1999: 72) studies intimate partner violence and the psychological effect related to anxiety, depression, and violence. The sample group is in the city district, Rachaburi province. It is found that 70.88% of males in the sample drink alcohol usually at parties. On the other hand, 71.43% of females do not drink alcohol. There is more likelihood that violence will occur in the family in which husband or other family members drink or are dependent on alcohol than the family without alcohol consumption.

Donnapa Hongthong (1999: 112-121) studies the factors contributing to domestic violence against women and the impact on health. The sample group is 350 married women in Payoa province by using questionnaire. It shows that 87% of husbands drink alcohol. In terms of the behavior after drinking, 73.7% behave normally after drinking, while 4.3% show violence. In respect of the extent of violence against women in the family, 82.8% of women experience mild level of violence, whereas 0.3% experience severe level of violence. In case of women consuming alcohol, the rate of domestic violence against women is only 2.7%. On the other hand, when men consume alcohol, the rate of domestic violence against women is as high as 75.8%. In case of husbands not consuming alcohol, the rate of domestic violence against women is at 10.7%

Budsarin Klongpalaban(1999:163-164) studies the factors that relate to attacking wives in Muang ,Sakeaw province. The sample group consists of 337 people. From the study, it was found that the occupation of husbands and wives don't relate to mental, physical, and sex harassment. That can explain that each occupation makes people have a different lifestyle, living, and thinking.

Vilasinee Pananakornsap (2002: 100) studies violence against women in partnership. It reviews that violence occurs in the same pattern in the repetitive cycles. When women get physically abused by their husbands, women will not walk away from the relationship immediately after the first abuse incidents, but will try to rationalize and justify the reason why it had happened. The study found that women

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often justify the 4 main cause of violence, which include finance, alcohol, jealousy, and role fulfillment and expectation.

Vichai Posayajinda and associates (2002: 54-126) studies about alcohol consumption in Lopburi province of 10,051 sample sizes. From the survey, there are 2 types of drinking in habitual drinker; drinking alone and drinking with friends. Drink alone is a behavior of who drink before dinner, while drinking with friends is behavior of who drink after work. 55% of men who drink alone often drink "before dinner" and 58% of drinking with friends often drink "after work". Moreover, drinking alcohol leads to quarrel problem more than health problem, and accident problem in male and female drinker.

Krittiya Aachawanidjakun and associates (2003: 41-47) study intimate partner violence and women's health in 2 provinces. Collect data from questionnaire of quantitative structure, group conversation and In-depth interview. It shows 41% of women in province A have experienced physical abuse after husbands drink alcohol and get intoxicated, compared with 30% of women in Bangkok. It can be concluded that alcohol consumption is often the condition leading to physical abuse against women in the family.

Pasuree Iamtim (2005: 95-96) studies attitudes of married couples in the city community toward the prevention and solution of domestic violence. The sample group is 266 married couples living in Dusit and Donmueng districts. This survey research collect data by questionnaire. The most often used psychological abuse method is ignorance, followed by raising voice, yelling. The least used psychological abuse is insulting. In respect of attempt to harm in the mild level, the most used abuse method is threatening and acting like they will throw objects at victims, followed by vandalize things in the house. The least used attempt to harm method is verbal threatening to revenge or harm. In terms of physical abuse in the mild level, the most used methods include throwing things at victims, pulling or pushing, followed by hitting with hands. The least used method is attacking with weapons. 75.6% of the population had used violence against their partners, while 24.4% had never used violence against their partners.

From review article, theory, and associate research, it is shown that alcohol intoxication has effect to the brain directly. It makes behavior and emotion of

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drunker changes. In the long term, the drunker will be alcoholic dependence. Abruptly alcoholic withdrawal will develop insomnia, nervousness, hallucination, seizure, and mental effect such as depression, anxiety, and aggression. Moreover, alcohol can bring domestic violence because the drunker has a labile emotion, aggressive personality, dilution, and uncontrolled himself. Therefore, I have idea concept that alcohol drinking leads to domestic violence. The variables are age of onset, duration, and type of alcohol beverage, frequency, amount, place, and who drink with. Violence is classified into 2 types- physical and psychological in which the extents of violence can be classified further into 3 categories (Low, Moderate, and High) for each type of violence.

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CHAPTER III
RESEARCH METHODOLOGY

This research is a qualitative research to study the alcohol consumption on domestic violence, using expost facto approach, which involves conducting interviews in relation to past incidents that had occurred in their partnership, the extents of domestic violence that may have occurred within last 12 months from the date of interview by qualitative approach as follows.

3.1 Area of study

The researcher has selected the area of study using the purposive method. Thanyarak Institute and Friends of Women Foundation were selected. For Thanyarak Institute, the criteria are based on the potentials of Thanyarak Institute in relation to rehabilitation and the number of alcoholic patients, while Friends of Women Foundation is a help center for domestic violence against women and has a number of consultation recipients.

3.2 Population and Sampling

The interviewees in this study are classified into 2 categories as follows:

1. Perpetrators refer to husbands or wives that had committed violence who attend rehabilitation for alcoholism at Thanyarak Institute who are willing to disclose information regarding domestic violence, who are either still in the relationship or have already separated.

2. Victims refer to husbands and wives of perpetrators who attend rehabilitation at Thanyarak Institute, who are willing to disclose information and also refer victims who seek consultation for their domestic violence problems with relate to alcohol consumption from Friends of Women Foundation.

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The rational for interviewing both parties perpetrators and victims is to get insights into the incidents and direct experience of the interviewees and to see the differences in how husbands and wives disclose information and their attitudes towards domestic violence.

3.3 Sampling Technique

In this study, the researcher uses the purposive method in selecting 17 sample groups. The criteria of the sample groups are specified as follows:

1. Husbands or wives who have attended rehabilitation for alcoholism at Thanyarak Institute.

2. Persons who have experienced domestic violence in any kinds who are either still in partnership or have already separated. And the events occurred within last 12 months from the date of interview.

3. The patients have the good perception, consciousness and no mental disorders.

4. Selection of sampling groups, researcher selected alcoholic male patients from Sura Building and Rehabilitation Building that have well cooperated on interviews. And there were non selected 5 alcoholic female patients because of no history of domestic violence.

5. Victims are whom seek consultation for their domestic violence problems with relate to alcohol consumption from husbands and wives of victims and the events occurred within 12 months from the date of interview. Data were selected from Help center for Women and Children of Thai Krieng Community, Samutpakhan Province and Friends of Women Foundation. The samplings were selected and made an appointment for interview by the center officer. The place of interview was home of a member of the center. However, the researcher was an interviewer and screened the interviewee again for suitable property.

3.4 Research tools

The tools used in this qualitative research are in-depth interviews with structure interview including non- participant observation, note taking in conjunction

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with using a tape recorder as well as studying patient files of the sample group at Thanyarak Institute.

The interview techniques involve interviewing a couple separately- one person at a time; each person is aware that their partner is also to give an interview in case of interviewing perpetrators' partners. In this study, the research has specified interview guides, scope of problems, objectives, research questions. The interview questions have flexible structure and are open-ended questions.

3.5 Quality check of research tools

The questions are constructed based on the research objectives and will be reviewed and improved by experts in qualitative research methods. After the first edition, the questions are tested in the interview of alcoholic patients who had experienced domestic violence to test the comprehensiveness and clearness of the questions. After the test, unclear or incomprehensive questions will be amended and improved further. A tape recorder is used during the interview so that the answers can be reviewed in terms to question comprehension, interviewees' reaction to the question, the flow of information, and the response of interviewees, as suggested by the experts in qualitative research methods to improve the questions before implemented in the actual interviews.

The credibility of the data received from the interviews would be cross-checked by enquiring persons close to the interviewees such as close relatives and nurses in charge.

3.6 Data Collection

In this research, the researcher will collect the data personally using in-depth interviews with interview guides and non-participant observation. The procedures are as follows:

1. The letter will be sent on behalf of the graduate school to the executives of the relevant organizations to ask for their cooperation and the permission to collect the data for the purpose of this research.

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2. The researcher approaches officers at Thanyarak Institute and Friends of Women Foundation to inform the objective of this research, consult the offices for collecting data, and acquire the list of alcoholic patients with domestic violence problem. Moreover, the researcher approaches Help Centre of Women and Children to ask for cooperation from Thai Krieng Community.

3. The researcher interviews the perpetrators and the victims personally by in-depth interview on one-on-one basis, using the interview guide in conjunction with non-participant observation and tape recording. The interview takes 1-2 hours per person and 1-2 times per person. The place for interview perpetrators is private place in the center. While the place for interview victim is a home of center's member.

3.7 Duration for Data Collection

The duration of data collection took 3 month from December 2006 to March 2007

3.8 Analysis

The researcher collected and analyzed data at the same time. After the research collected data, the researchers prepared the Content Analysis by recording, transcribing, rearranging, and sorting. After that, the researcher would take note for questions that the researcher would like to know more.

All of collected data after rearranging and sorting will select some content that relevant to the point of analysis for coding.

Coding made from data that direct to the point of analysis such as personal data, alcohol consumption pattern, characteristic and level of violence would be coded. Then, the coded data was sorted, analyzed, and summarized for reply objective of this research.

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CHAPTER IV
RESULTS

The study of alcohol consumption on domestic violence is a study based on case studies from the real life experience in order to find the answers, rationales, and key factors for domestic violence. The research studies the background, history, and environments of the sample group to gain clear understanding into the problems and to interpret and explain the past events that occurred.

In this research, in-depth information was collected from case interview with all 17 target subjects in 2 groups.

4.1 Eight cases of the perpetrators. Data for analysis are personal data, consumer behavior, and domestic violence experience.

4.2 Nine cases of the victims. Data for analysis are personal data and domestic violence experience. The following are the data details obtained from interview.

4.1 Case Study: The perpetrators group (eight cases)

Case Study: 1

Mr. Tub (assumed name), 40-year-old Thai, who completed his Mattayom 3 as his highest education, once worked as a wage worker for 300-400 bahts in a pick-up-truck service garage, owned by his sister. As for the interview time, he had no jobs for almost two years, and was with two wives; the first was a clerk working for the same garage; the second, a wage worker who worked in another garage owned by his brother. Mr. Tub and his 40-year-old first wife were in married life for twenty years with two children. He was in relationship with his second wife for 1 year with no children.

Being the second child of his parents, Tub has one elder sister and one younger brother. Although his father and his brother drink alcoholic beverages, no one else in the family was alcoholic addict. Having been addicted to alcohol continually for 22 years since he was 18 years old, Tub drank Thai traditional vodka (Lao Khao)

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regularly and beer sometimes when with friends. Usually, Tub was taciturn, introvert, unsociable, and solitary. **In contrast, after alcoholic drinking, his emotional and behavioral characteristics changed;** Tub spoke and enjoyed singing and dancing, calling back old issues. **"I am grumbling man and fastidious,"** said Mr. Tub, and continued, "When drunk, **I was notified that something I said did not make sense, and sometimes was based on no good reasons**. I could get angry or very angry easily if teased in some ways. Being more extrovert, and not shy, I could encounter people in group or passers-by, but if no alcohol drinking, I had no confidence or felt relaxed in a public places, and would let others go before me, such as buying things and I did it last." Mr. Tub said that only 3 gugs or more could make him slightly drunk (tipsy), and becoming losing conscious control, grumbling a lot, talkative, easily losing temper. **His talkativeness on all the past or any issue did annoy his wife.** However, if no alcohol drinks, he was quiet, and after having dinner meal, he would take a shower, and go straight to bed

About 2 years ago, Mr. Tub began to drink heavily; **½ - 1 bottle of Thai vodka per day, costing about 60 bahts**. He drank it alone normally every evening after work, then taking a shower and going to bed. When with friends on some days, he drank for a long time and a lot of both beer and the vodka (which was about 1 round bottle) at the garage. **Due to his drinking habit, he was demoted from mechanic position to lower position**, i.e. to change wheels and inflated it. Mr. Tub was not happy, so he refused to work in such a position, and was jobless for almost two years. Since no job, he asked his wife for 500-1,500 bahts/week. "**I am such a bum**," say Mr. Tub, who sometimes scold at his wife, and found her a boring.

Drinking alcoholic beverages emphasize domestic violence. Mr. Tub admitted that it was possibly true that alcohol could cause physical and verbal abuse because alcohol was really a root cause of losing consciousness, losing emotional control, fearless to anything, not shy to make noise, fastidious, and violent to wives if being boring.

The wife often said that "**If you quit it, you wouldn't be like this.**" When intoxicated, he was talkative, noisy, fastidious, demanding at times. This made annoyed his wife. Mr. Tub said, **"If I were not to drink too much, my wife would**

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say nothing. Sometimes she buys the drinks for me. She said "drink but not drunk to the extent of no proper judgment."

In his childhood, Mr. Tub often saw his mother's younger sister had a strong quarrel with the husband, and with assault. He said his childhood experience contribute to his family violence in some extent. Another contributing factor was family education – I was not a well-brought-up child. "I had no one to instill me in my childhood; only by some monks when living in a temple," said Mr. Tub.

He said "I think quarrel and assault are common between husband and wife, and in different degree. Some did it before their own children. In our case, we did it twice; it was my wife – she was scolding, and I shouted back, but with no physical abuse. As for women matter, my wife was once too angry at me, and took all the clothes of a woman out and burnt them down —that happened once."

Altogether, it was about 10 years since Mr. Tub hurt his wife. The first one happened after drunk; it was a big quarrel, and starting with my wife scolding me on drinking alcoholic beverage, and I then charged her in the way just to threaten with verbal abuse, "You will be sorry!" It ended with him walking away doing nothing else. It was due to the esteem for his mother-in-law, and he was in her house. After returning to consciousness, his wife began to blame him.

There were just only few times that he physically abused his wife due to drunkenness, and scolding to each other such as his wife said he was too lousy and noisy, and he returned it by saying that she was too stupid. It was once that he did hit her face with my fist – the only single hit was 5-6 years ago; it struck her forehead and it swelled out. Almost every time when he got heavy drunk, they often had quarrels.

In September 2006, Mr. Tub was once in the middle of giving up alcohol; it was made due to his esteem for a monk in Khon Kaen Province. He was not successful because of friends coming for drinking. With friends, Tub had more, and finally he was quite drunk. He said, "It is all about determination." When no friends, I could have only 1-2 gugs , then having dinner, taking a shower afterwards, and then going to sleep; no getting drunk.

Being drunk can cause injuries. Mr. Tub mentioned that he had an injury due to being drunk; it was perhaps on the 10th of December 2006 that he had been drinking

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and while on the way to pick up his second wife at garage in Bangborn and falling down from a wooden bridge, hitting his right shoulder against some log. The consequence was that his shoulder went out of place, causing him weakness and pain in the shoulder wrapped with elastic bandage.

The most physical abuse and the latest happened on the 16th of December 2006. On that day, Mr. Tub had a round bottle and a half of Thai (traditional) vodka with a friend from 08:00-15:00. He said, **"I was drunk and made loud noise, but did no harm; it's just roaring drunk. OK, I was scolding and then yelling at my wife. To her, I went "You STUPID! Son of a BITCH! Get out of my sight, and GO to HELL!!! But no assault!"** The end of it was that my wife reported to police station, and I was put in jail that night. In the morning next day (17 December 2006), both police and my wife took me to a hospital for medical treatment. **"Yes, I live in a rented house, and I made such a loud noise disturbing neighbors, but is it?," said Mr. Tub, and added "Taking me here perhaps for behavioral treatment. I know that if I drink no alcohol, bad things would never happen. Liquors kill me!** My wife wants me to quit it. She warned me off a number of times; threatening divorce." He continued, "I drink because I was annoyed both wives at times, and I cannot leave either of them. What more, no jobs. Then I became to depend on booze."

Case Study: 2

Mr. Tim (assumed name) was a 47-year-old Thai, who completed his Prathom 4 as his highest education, worked on home improvement and repairs, with his son to earn 10,000 bahts/month. Mr. Tim was married for 28 years, and had two children.

Being the youngest child of his parents, he had three elder brothers and one elder sister. Though, his forth brother drank alcoholic beverage before meals; except him, no one else in his parent family was addicted to alcohol.

Mr. Tim began to drink liquor since he was 20 years old, continually for 29 years. **His normal characteristics were steady and calm, and in good temper. Alcohol affected his characteristics and changed them** to able to ramble (talk for too long on different subjects), especially on things in the past, and all secrets. If someone said what he did not want to hear, he would react strongly against them. Mr. Tim pointed out that **"After drinking alcohol, errors at work can happen a lot.** For example, wanting to cut wood to get a 20-cm piece, I made an error in measuring,

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resulting in a 30-cm piece of wood, instead," He said that he made such a lot of mistakes because of confusion. When Mr. Tim had 3 gugs of liquor, he would slightly lose consciousness causing him to say something nasty, and often swear words. But no brawl quarrel and fight. At times, after returning to sober, I was notified that I had done bad things that I could not recall, or to be aware of it. I was so embarrassed, and I apologized those who I had done something bad to. When getting drunk with friends, talking at times was based on no good reason, and often boasting on almost any subjects. However, normally Mr. Tim had alcohol drinks at home alone, and going to bed afterwards. This was because having companies. He would rather not want to have companies for drinking because he did not want to get into dispute.

For the last 1-1 ½ year ago Mr. Tim had heavy alcohol drinking. **He had Thai traditional vodka 1-1 ½ round bottle each day; 1 gug in the morning, 1 gug at noon, and 2 gugs in the evening (1 gug = 1/4 of a round bottle). His alcoholic beverages cost him about 100 bahts/day. He preferred to have alcohol drinks at home after work.** His son gave all his salary to his wife, and his wife, or sometimes his son daily gave him 100-150 bahts/day. He mentioned that if he would not drink, he could have saved 70-80 bahts/day.

Alcoholic drinking is the driving factor of quarrels, fights, and domestic violence. Mr. Tim confessed that the drinking makes him having more of the nerve to jump to any fight; getting angry or having quarrels easily at whoever saying things he did not want to hear.

In his childhood, Mr. Tim was so afraid of his elder sister because she would smack and yell at him. "I was supposed to raise buffalos, but I sneaked away to play around. When she found that out, I got smacked!" He would do whatever the sister asked him to, including filling in big water earthen jars with water for house use. If he refused, he would be scolded, yelled at, or hit with wooden whip at my legs, or bottoms. Whenever the sister began to strike him, his mom would stop her by shouting out "Enough." There was one particular case that broke the habit. Tim said that it was a time that the sister in the house was scolding at him, and Tim – a bigger boy than he had – became too irritated and took a knife out for threatening by stabbing into a house wall made of bamboo, causing her to be frightened, and crying. **However, childhood experience did not affect Tim's domestic violence.**

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"Quarrels, and assaults between family members is so common", said Mr. Tim, and added, **"I do not beat or hurt anyone; I simply use words.**"

Mr. Tim did make some domestic violence that was long ago, due to alcohol drinking. The first violence was caused under the effect of alcohol; Tim requested to have a specific food but his wife made something else, and that annoyed him quite a lot so that he threw the food away, and screamed out at her, "Son of a bitch."

Next violence Tim did was done ten years ago. Staying in a house of his wife's parents, Mr. Tim was slightly drunk after having just one gug, and his wife was out for card gambling, as heard, loosing money. It was one o'clock, and Tim requested his wife's sister to call her back home at once. At the moment his wife returning home, Tim threw a hammer at a wall! She ran into a room and locked it.

Violence repeated the previous in the way that his wife was again doing gambling with friends until it was too late at night. By the time she arrived home, Tim was waiting and drinking alcohol. His wife went into the room, and locked it. Tim broke the door with angry to get in, and she escaped into his father-in-law. The wife's sister came to block and stop him, trying to cool him down. Everything then calmed down. Later his father-in-law arrived from Umnaj Chareon Province, and seeking an answer, "What the hell did you both do?" Tim did not express anything in words, **but chopping rice sack repeatedly with a paint metal tool. The father stayed quiet.**

"It was all about threatening; just that," Mr. Tim said. The quarrel between Tim and his wife were off and on because when Tim had a complaint his wife was at a standstill, but let him go on complaining or grumbling.

The last violence happened in November 2006. Tim had alcohol as usual, and two bottles of Kra-Ting-Dang while his son told him that his wife was in the middle of card gambling. Tim told that his wife left work at 15:00, and reached home around 17:00. After having finished dinner, she left home and came back home around 01:00 in the morning. He yelled out, "**Damn you. Go as you pleased, and don't return. Take your stuff out if you do gambling. You would go to hell and ruin your life and money. You badly behaved just like your mom. Son of the bitch."** His wife stayed at a friend's house for a night. **Mr. Tim thought that it was the most domestic violence and the angriest he did because of his drunkenness and his wife gambling behavior.**

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Determination to quit drinking was made by Tim on the 18th of December 2006 that Tim had 1 gug of the liquor in the morning to be his last drink ever. He did not have any alcohol at noon and in the evening. Something wrong to his health happened at 16:00; while he was packing his tools to go home, he was fainted and falling down and on to his son working side by side, and Tim suddenly had a seizure, and biting his tongue. He was helped and taken to hospital in Pravech area. After having 2 bottles of saline solution, Tim was brought by his son to Thanyarak Institute for medical treatment since the 20th of December 2006.

Case Study: 3

Mr. Chai (assumed name), 39-year-old Thai, who completed his Mattayom 3 as his highest education, was a barber who rented a town house for his own business in Bangkok where he had lived for 20 years. His daily income was around 1,000 bahts, and the cost of his monthly business (electricity, water and house rent) was around 18,000 bahts. His wife made a living by selling roasted pork and chicken on streets. They had 2 children; the older was 7 years old, and the younger was 4 years old). This present wife was "his forth legally wedded wife." The reasons Chai divorced the former wives were sharp tongue, willing to stay on her own parents' house, etc. Only Mr. Chai who worked at home (his wife worked out of home) so he took responsibility in taking care of their children. Chai is the fourth of his parents' family; he has three elder sisters, and two younger brothers.

Mr. Chai was addicted to alcohol; however, none in his family was addicted to alcohol, or even regularly had it. Chai drank alcohol usually since he was 20 years old, and continually had it for 19 years. Chai drank colour spirits regularly with friends. He said that **"He would not drink alone. Drinking once made him drunk for 3 days. If he was exhausted, and then he could not remember things – only remember some if focusing steps by steps in chronologically sequence."** Some of his usual characteristics were impatient and hasty; things must be done as quickly or early, and if not he would become irritated or angry. Chai believed that alcohol changed him; **it changed him to be more kind, and calm. It also turned him to be braver, quick in making decision, and some other things.** After being no more of teenagers, he never had fights or quarrels because he was more modest and respectful towards others especially the older.

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If he drank too much, i.e. one bottle of the liquor, he would lose emotional control or even lose consciousness. Being drunk could make him unable to control himself, and he could beat his children. **He had Brown spirit at the amount of half of a soda bottle for twice a week regularly.** That was a good appetite for him to enjoy meals. However, he drank it heavily sometimes if with satisfying friends, i.e. from 21:00 until the time that monks did food offering deed. It was because he did not have quarrels with anyone, so he had quite a good number of friends. In general, he shared the cost of drinking with friends who shared the drinks. Normally, he had liquors at home with friends and paid for friends occasionally because drinking out cost him too much. Drinking cost him around 200 bahts/day.

Chai admitted that drinking alcohol, to a great extent, could lead to quarrels and fights including domestic violence. It was because that if having too much of it, one could lose control of themselves, and could get angry easily to any closed person who had not done up to their satisfaction, resulting in quarrels and fights. He added that the major cause of quarrels between husbands and wives was the situation of no money. No money raised stress.

In his childhood, Mr. Chai noted that his parents' fights were due more to money matter rather than others because of education of all their own children needed money. When being a small child, Chai was smacked or beaten with bamboo rods the most among all his siblings; it was because he did not attend schools. Some of the rods went broken to pieces. He was made not to cry. If he were to cry, he would be beaten even a lot more. **It all caused Chai to raise his own children the same way.** He confessed that he did it to his own children a few times. There was once that his older son threw a tantrum when Chai refused to buy him a toy, and that made Chai lost all sense of proportion; Chai took the son into a restroom and beat him badly so that bruises were all over his son's body. That was the most serious that he did to his children due to losing temper, and that made his father and mother coming from a distance province to see the son.

Mr. Chai's first domestic violence was 7-8 years ago. It was all Chai's fault. He wanted to have Chainat delicious field fishes with a group of friends; therefore he took all his wife's money from her bank account by using his wife's ATM card, together with his cash of 12,000 bahts. Wish his cell phone of to have no

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communication with his wife, he left home for the fishes for 2 days and 1 night, and used up all the money. After being back home, his wife scolded at him, “What a damn evil. That money is for the children education!” Chai replied badly back, “Don’t say a word. All gone is gone. Not die yet, and we can work to have it.” In the end, there was no physical abuse to his wife. Mostly it was only verbal abuse.

Another domestic violence that Mr. Chai did was 2 years ago. It was a road accident that happened to his older son who grasped his mother shirt while they all were about to cross a road, and suddenly the older son ran to cross the road, and ahead his mom who was carrying the younger son. A car ran into the older son, and broke one of his leg in two. Chai recalled, “I was beside myself! I was incensed at my son injury, and slapped at my wife’s face twice heavily for not taking good care to the son, making my wife to stagger headlong!” He admitted that he was totally out of his senses to act such a thing. That was the most severe physical attack he did to his wife, and that was not under alcohol.

It was then come to the time that Mr. Chai determined to quit drinking. He quitted drinking for 6-7 months since June 2006. It happened partly due to a cold he had at the time determined to quit, and he did not touch any alcoholic beverage. It was until the 10th of December 2006 that Chai was in the event “Royal Flora Ratchaphruek 2006” in Chiang Mai for two days. He tried a local alcoholic beverage which was a kind of herbal Thai vodka (Lao Dong). Each gong (กิ๊ง) cost 10 bahts. He drank it one after another as his pleasure developed correspondingly. “That’s my bad point,” he accepted. After leaving the Ratchaphruek 2006, he had several kinds of liquor everyday from 21:00 until 01:00 or 02:00.

The worst health problem due to alcohol happened to Chai. It started with one of his customer who was working for the Excise Department brought a gallon (20 liters) of confiscated liquor for him. The liquor had very high content of ethanol, and seemed to be similar to herbal Thai vodka (Lao Dong). Chai and his friends had a get-together to consume the liquor; 30 people finished it in one day. Chai said that “It was a heavy drink that he continued to drink heavily for 7-8 days straight. Later when having no alcoholic drinks, health problem arose; Chai was vomiting, tired, exhausted, and rapid heart rate (palpitations). On the 21st of December 2006, after letting Chai

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had half a bottle of 40-degree liquor, his wife brought Chai to have medical treatment at Thanyarak Institute. He was found to have symptoms of alcohol withdrawal: fatigue, nausea, vomiting, headache, insomnia, sleeping difficulty, loss of appetite. On the 21st of December 2006 (according to the institute patient chart), as an outpatient, he received medicines to be taken at home.

The worst domestic violence that Mr. Chai did was on the 24th of December 2006 after having 3 bottles of Thai vodka. He had alcoholic severe symptoms: a state of confusion and hallucinations (visual); he thought someone was going to hurt him at night, walking with no proper sense, grasping a knife in his hand with aggressiveness, trying to harm his wife and children. It was the most violence that Chai did. Finally he was brought to the institute for treatment on 25th of December 2006.

Case Study: 4

Mr.Wong (assumed name) was Thai, who was 54 years of age. He had no job for 3-4 years. He finished school at Mattayom 3. More than 10 years ago, he separated with his wife though they had 3 children. After that he had new wife and lived with her without children. This wife worked at government organization in Thonburi area, gaining about 10,000 baht a month. He also sold sweet fish and grilled squid after work as another way making more money.

Wong was the first child in family, who was born after his father died. His mother also had more 2 children with the second husband; her youngest son was addicted to alcohol. Wong told that this brother drank alcohol before having meal and drunken everyday. Wong tried alcohol since he was 22 years old. During that time, he worked as a clerk at government organization, where he was persuaded by colleagues to drink after work everyday. He resigned from that job after working there for 9 years because his friend induced him to apply to join the police, but he could not pass the test and was not recruited. He then became a taxi driver and drove taxi for over 20 years. 1-2 months after he resigned, his wife gambled on cards and lost a lot of money. Later, his wife was helped in paying debt by a guy that made him jealous. Wong found out later that his wife went out with that guy, driving the car that he bought for her. **“It was like that car killed me and broke down my family. I paid for our house 50,000 baht. I had to quit my job, having nothing, lost job and position, lost house, and also lost wife and children. I was so stress, couldn’t do anything.”** This

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made him drank heavily and continuously for a long time. Usually, Wong was a cool person, had lively personality, and talked less. Once he drank, his mood and behavior was totally changed. He became a hot-tempered person, was talkative, and liked to sing and made fun, but not to fight with others. Someone told him that he was talkative only when he was drunk, but if he was not drunk he would not talk. By drinking ¼ of a bottle for 4-5 times, Wong would get drunk, made fun, and lacked conscious in controlling emotion. If he was scolded by his wife, he would get stress and made a quarrel. Mostly, his wife complained about drinking alcohol. This made him angry and bought more alcohol. But if they did not make a quarrel to each other, they could have meal together after he drank. Sometimes, he made a quarrel after drinking only 1-2 times of ¼ of a bottle. **"Emotional drunk"** he called it.

Wong drank one forth of a bottle of Thai vodka for 4-5 times everyday for 2 years. Sometimes, he got drunk. But if he was in a good mood, he would not be drunk. He liked to drink alone at home; his wife also drank with him sometimes. He usually paid for each time of drinking about 70-80 baht. "**It is because of stress that makes everything become like this. My future should not be like this. If I didn't resign, I would not be in this situation. Otherwise my salary might be more than 10,000 baht."** he said.

Drinking alcohol resulted in fighting and domestic violence. Wong said that it was because of lack of consciousness and anger. He often had a quarrel with his former wife when he went out to drink alcohol. His wife used to throw a rice plate to hit him that cut his eye brown. His wound was stitched 8-9 sutures. Moreover, when Wong noticed that his wife had another guy, he beat his wife's head with his hand. Whenever he got angry, he scolded her using rude words like 'mueng' and 'goo'.

When he was young, Wong saw his neighbors fought, reproached, and assaulted to each other. He also watched TV and saw the same, but he thought that it was only drama. For him, domestic violence was caused by drinking alcohol rather than anger or jealous and it was not an imitation.

Fighting and abusing on family members was normal for Wong. **"Mostly, I was complained about alcohol"**, he said.

The first violence he did to the present wife causing by alcohol occurred several years ago starting when his Thai-Chinese friend told him something. **"He said**

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he took my wife to a motel. I found out by asking my wife, but she scolded that friend "you are…face", saying with rude words." Wong clashed with his wife about this problem many times and she challenged him to bring her to swear. Another case occurred when his wife brought a couple to stay at home for a night that made Wong got angry and drank alcohol. When he came back with drunkenness, he fought with his wife. Last 2 years, he had a quarrel with his wife again and, as he drank, he hit her with a broom and scolded rudely. "**Let's go and see. I wrote on the calendar. Who tells a lie will be died cruelly."** Wong was often scolded when he was drunk **"You only drink alcohol, you will die!" and he replied "It's my business. If I die, you will get money from my cremation."** He also said that if he felt so angry, he would attack his wife.

On 8 December 2006, his wife took him to hospital by deception. While he was enjoy drinking, his wife asked him to bring her to see their kits. **"When we reached the hospital, I realized that she did it again. I was so angry that she told me a lie and fought with her. I tried to punch her but she ran away. I scold her rudely and loudly like I was drunk.**" According to a nurse, Wong scolded his wife calling her several names as animal. Wong said that it was the most severe event in this year that he still angry. "**I try to drink less. But if I get stress, I will drink more. I can't have meal and won't sleep well with no alcohol."**

Case Study 5

Mr.Sak (assumed name) was a Thai man of 39. After he completed primary school, he did not study further. He, together with his wife, rented a building for selling foods and could earn about 40,000 baht a month, but he had to pay 30,000 baht for the rental every month. Sak had married for 14 years and had one child.

Sak had 9 relatives; he was the sixth child, having five older brothers and 3 younger sisters. In his family, nobody was alcoholic. Only his father and brothers drank alcohol. **He started drinking at the age of 18** and continuously drank for 20 years from that age until now. He was a calm and quiet person who liked to be on his own. He looked cool, speaking softly. If he drank, his emotion and behavior were always changed. He told that "**I will be more aggressive. If I am scolded or if I feel unsatisfied with someone's word, I will directly respond. Someone told me that when I drink, I become a new person, who always speak what people don't like**

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and act aggressively, from a quiet person to be more talkative and fearless." When Sak drank a round bottle of alcohol, he got drunk and was hot-tempered and unable to control mood and words. This led to fighting. "But I am conscious of doing things, I can control myself." He said "**Though I am drunk, if I see people are fighting, I will go into hiding."** Sak had never fought with other people because he always drank alone at home.

Last 2 years Sak drank a lot of beer, white liquor mixed with Thai vodka named '11 Tigers', and color liquor called 'Riantong' and 'Sangsom'. Because of drinking Thai vodka 1/2 bottle a day, he addicted alcohol that made him gained weight. For beers, he drank 2 big bottles each time. In the case of color liquor, he drank a half bottle-a bottle everyday. He paid for each drinking about 150 baht.

Drinking alcohol resulted in fighting and battering to family members. Sak told that **"Drinking alcohol causes quarrels. If I drink, I can't work well. Always forget what customers order. My wife complained a lot that made me angry. This often created fighting."** In the year 2005, he drank a lot everyday and went on the rampage. One time, he threatened his wife **"Shut up! Be careful, I will shoot you one day. We will die together**." He also used to destroy a cupboard and to throw away telephone when fighting with his wife.

During his childhood, Sak used to see his parents fought with each other about gambling. Such situation became normal thing in family but no violence occurred. For all children in family, their father was so cruel because he hit, slapped, and punched. When Sak was about 16-17 years old, he was punished violently when doing something wrong. He said that his childhood experience associated with domestic violence he did. "**My parents treated me in such ways. When I solve the problem I also do the same**"

For domestic violence, Sak told that "**It is not normal event**". He also tried to change himself by discontinuing drinking alcohol. His mother-in-law also asked him to stop, but Sak still could not though he was treated at hospital several times.

The first time he used violence with his wife was over 10 years ago. It was because of drinking alcohol. Sak tried to recall the event and told that it happened once when he did not allow his wife to go out with his sister-in-law **"If you go, you will see what happen to you when you come back"**, *that is what I said."* He drank while he

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was waiting for his wife until 1 a.m. When his wife came back, he shouted to her "**I told you don't go out, but you did**." He pulled his wife from taxi but he was inhibited by his relative. He did not beat his wife, just scolded and threatened.

Last 2 years Sak drank heavily and often fought with his wife. Also, he could not work as well as before because he always forgot what the customer said and did mistake. His wife therefore did not allow him helping her to sell foods. So, he bought alcohol, hiding it in his room. Once he drank, he destroyed objects and irritated his parents-in-law. By this, the parents wanted their daughter to separate from Sak, saying that "**Nothing better when living with you. You just drink alcohol**." His wife always complained that ***"You did nothing, so you are worthless."*** Sak used to hurt himself by cutting his arm just because of the words "Being worthless". "**If she doesn't live with me, how her life can be better, we used to help each other to sell food 5 baht a pack. We extended to have our food store and have sold for 7-8 years.**" he told seriously.

Sak told, **"In April 2006, I hid a knife under the bed. When my wife saw it, she asked me why I put it in the bedroom. I replied that I just put it for nothing. She did not believe me and told her parents that I would kill her."** His mother-in-law came to his house and fought with him. Sak went upstairs and took that knife in order to kill his mother-in-law, his wife, including himself, but the landlord came to stop him. From that experience, his mother-in-law got angry and asked him to apologize. Sak said that it was the most violent that he almost killed other people because of drinking alcohol. He was so sad for that; his mother-in-law asked him to separate from her daughter.

Sak continued drank heavily until October 2006 when he was sent to admit at a hospital for about one month. After he discharged from the hospital, he did not go to get more medicine following to appointment, but still drank a lot of alcohol. Later on, he got tremor, talked alone, and got insomnia. His wife took him to hospital again finally.

Case Study: 6

Mr.Dah (assumed name) was Thai aged 39. After his Mattayom 3, he left school and used to work as macro car driver. From that job he could earn 20,000-30,000 a month. Since he was unhealthy with jaundice and often got ill, he had quitted

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that job by suggestion of both his parents and his organization. He went back to work as a farmer at his hometown in Suphanburi province. He married at the age of 22 and had no children. In the present, he already separated with his wife.

Dah was the smallest child of the family. He had 3 older brothers and 1 older sister. Everyone in his family drank alcohol; Dah and two brothers addicted alcohol. He, himself, began **drinking alcohol since he was only 17 years old.** He drank continuously for 18 years. Moreover, he had used drug (amphetamine) drinking with beers for several years since he was 19 years old. Recently, he stopped taking drug for 4 years after the fight against drug had been promoted by the government. Afterwards, he turned to drink coffee 3-4 glasses a day and beer, and drank white liquor sometimes. His personality was lively and calm. He was also like to talk. If he drank, his behavior was changed from cool-tempered to hot-tempered and became a cruel person. When he got drunk, he shouted and scolded aggressively.

5 bottles of alcohol could make Dah to feel uncomfortable and intolerant. It was difficult for him to control conscious. He also lost of awareness and spoke rudely and aggressively. He sometime scolded his friends who were drinking together with him; and sometime fought with them and got head injury. "**I used to be in prison for 1 year and a half when I was 27 years old because of drunkenness and madness, couldn't control conscious when fighting with friends during drinking. I used a knife to cut a friend's neck. I didn't intend to do so. I felt sad**." Last 5 years he drank heavily ever than before. Almost everyday he spent 200 baht for having 5 cans of beer. He mostly drank alone at home. If he went to drink out side with friends at fresh beer garden sometimes, he would drink more and got drunk.

Drinking alcohol resulted in fighting and battering to family members. Dah said that "**Drinking alcohol increases my blood pressure, but decreases my conscious. It makes me impatient, self-centered, and don't listen to anyone in family. This causes unconsciousness.**" Dah used to get mad because of alcohol and drug. That time he strangled his parents, beat his wife, and damaged objects. When he was a little boy, he saw his parents fought with each other because they had different ideas. Dah said that **when he saw fighting among parents, he was unhappy, depressed, worried, and lost heart. This caused him to deviate in bad way**. "I take such manner I saw as a model.**"**

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For domestic violence, he said "**It is not normal, not a good thing. I don't like it. It can make unhappiness in family and decreased generosity. I am also trying to resolve. It needs to have more reason before doing, someone warned me also.**"

His first time of treating his wife with violence because of drinking alcohol was last 7-8 years. He said that **"It happened because I thought that my wife had other guys."** He was jealous of his wife, especially when he drank alcohol. "**I was sad that she had relationship with other guys. We had a quarrel with each other. I scolded her rudely and kicked her 2-3 times. She then moved out to live with her parents about 2-3 months and came back."**

Domestic violence between Dah and his wife happened many times because he drank heavily. When he got drunk, he would have more jealousness and it caused fighting among them. Dah said to his wife that **"If you think that you will separate from me, you should be a prostitute."**

The most important violence that made Dah felt very sad occurred in 2006 while he was at home. His friend told him that his wife began to have a new partner. Since he believed what he heard and he also was drunk, he was in mood and went to his wife. He pulled his wife, slapped and kicked her. **"I love my wife."** He explained. By that problem, his wife asked him to separate, saying that **"We have different ways of thinking."** Dah felt depress and upset. Finally, he decided to let his wife leave from him and his wife went to live with one of his friend.

Dah still drank heavily because of family problem. Last November, he drank 10 cans of beer and had tremor, confusion and paranoid. His sister brought him to hospital.

Case Study: 7

Mr.Kiet (assumed name) was a Thai man of 25. He ended studying after completed primary school. He worked on power lines in people house, gaining 180 baht a day. Since 2000, he lived with his wife, who worked as a maid at a hospital. Kiet was a single child of his family. His father passed away since he was a little boy and his mother had new family. So, Kiet was sent to be looked after by his grandmother. Last 13 years, when his grandmother passed away, he stayed in the temple and sometimes lived in friend's house. Once he gained from working at a

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garage, he kept that money for continuing his study. He also got a job washing dishes at night. At that time, he could save some money and could buy a new bicycle. This was because he had some good friends helping him to find job. He knew from his aunt that his mother became an alcoholic. He started drinking alcohol at the age of 22 and used drug before that. The reason that he really addicted drug was the persuasion of his brother-in-law, who used drug before him. Because of drug addiction, he used to tell a lie in order to get money from many people, including his mother, to buy drug. Normally, he was quiet, intolerant, and hot-tempered. It was easy for him to get angry. If he drank, his behavior was totally changed. **"Drinking alcohol makes me fun. Before I drink, I feel depress. But once I drink, I have new behavior, like to talk, but speak strange words and want to fight. That is annoying for people beside.**

Drinking alcohol made him dared to do thing with more confident**. "The habit will be strange; can do something that is unacceptable without thinking about what will be happened afterwards. Sometimes, what I did was just to show my friend that I can do it"** If he drank 3 bottles of alcohol, he would lose conscious and could not control his emotion. **"Drunker always care what people who are drinking with him talk and easily to be induced by them. I won't care when my wife called me for having dinner and that always make a quarrel."**Kiet used to fight with people just because of drinking alcohol. **"When someone tried to suggest me but I didn't want any suggestion, or when someone looked at me without saying, it could create fighting among people. Simply speaking, it is only drunkenness."**

About 1 year ago, Kiet drank more than ever. He had 2 bottles of white liquor everyday after work and even more if he drank with friends. He often drank at home, but sometimes drank at office with friends. He spent 200 baht every time he drank. **"If I have more money, I spend all for alcohol."**

Drinking alcohol resulted in fighting and domestic violence. Kiet explained that alcohol was a cause of such problem since after drinking we could not be reasonable and got angry easily that always built fighting.

In childhood, Kiet saw fighting between his mother and his grandmother. Since his mother did not give money to her mother and she got drunk on that day, she was hit and got head injury. Additionally, whenever he woke up late, not to do

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homework, or went out to play water, he would be beaten by his grandmother. He said that **domestic violence could be caused by childhood experience as well as the way people were raised.** For Kiet, **"Domestic violence is normal problem. It can be happened sometimes, but not too often."**

The first violence he did with his wife causing by alcohol was told by Kiet that **"It was around the year 2004 that one day I went out immediately after work to have alcohol and she complained me about letting her to be alone. She said "why do you let me stay home alone like I am as a dog" and we clashed each other violently using rude words."** Afterwards, Kiet and his wife also had another quarrel and he pulled his wife's cloth using power scolding that **"You always want to go to your parents when you have problem. If they pass away, who will you live with?"** He also used to strangle his wife because of drunkenness that made him lost self control. His wife cried and called for help. His father-in-law and mother-in-law were also drunk and came to beat him both with hands and stick.

The most severe violence occurred in 2006. **"I drank and fought with my wife. Since mother-in-law and father-in-law also were drunk that time, they scolded me harshly and intended to hurt me. I then hit my wife, who stood between her parents and me. My wife's bother also came to strike me using a long metal stick but I could catch that stick and fought back. After I went out, father-in-law followed me, but I stopped him by saying that "I am not afraid of you. Don't think that I don't dare to hurt you" then he stopped."** From that situation, his wife moved to stay with her parents for almost a half year and came back because she was pregnant. Kiet still drank continuously. If he did not drink, he would have nausea, vomiting, tremor in hands, insomnia, moody, and sometime had hallucination. His wife finally brought him to hospital in November 2006.

Case Study: 8

Mr.Suk(assumed name), Thai male 30 years old with vocational degree, and works as employee with the salary of 6,000 Baht per month. He and his wife don't live together. They have 2 children, the older one living with his wife but the second one living with him and grandmother.

Suk has 3 brothers, he is the third child. His father died when he was 3 years old. His brothers sometimes drinks whisky but not addicted. Suk firstly started

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drinking when he was 15 years old, he keep drinking for 15 years. Moreover, he used to smoke weeds for about 10 years (now he is quit), and use to inject heroin for 3 years

Normally Suk is cheerful person, but after drinking his emotion and behavior changes. He will become more aggressive and temper. **"Totally changes"** No one can control him when he become unconscious, he would follow every friends request. And if he drinks about 4 bottles of whisky, he will completely lose control and cannot remember anything. "**I used to flight with my rivals when I got drunk**"

These 4-5 years ago, Suk drinks tons of whisky which make his health gradually getting worse and worse. He usually drinks 2 bottles of white whisky everyday. "**Not get drunk because I'm alcohol-tolerant**." He likes drinking alone and its expense for one time approximately 100 Baht.

Drinking is one of the cause making family conflicts. It is because when Suk drink some whisky, he will turn to be another person with the temper behavior and more aggressive, dirty words and careless spending in money which makes family falls.

This first conflict with his wife was due to this whisky. He told that he drank whisky heavily 4- 5 years ago. After working hour, he came back home and changed clothes rapidly to ready to get out again. His wife always complained at him and said like fuck you or you are moron which is quite dirty words. He replied back with the threaten words like "**Be careful, I would payback somehow**". Sometimes he broke up the tools in the kitchen. When his wife got sick of his drunkenness, she would go back to stay with her parents. "**I do not want her to go, so we had a fight**"

In March 2006, Suk had the serious fighting with his wife and they decided to stay away. She had another guy and I felt jealous about it. Then I drank 1 bottles of whisky and 6 bottles of beers. About 2 hours left, she came back and I kicked her butt and said "fuck you bitch". After that, I drank with friends until I fell sleep. Suk said he was absolutely regretted about it. It happened by whisky. She was frustrated and came back to stay with her parents for almost 1 year with no keeping in touch.

Suk drank lots of whisky, he was weak and absented from works sometimes. Every time his mother complained about alcohol, he would be angered at her. He broke the tools in the kitchen and telephone. He was frightened and scared, so his mom decide to take him to Thanyaluk hospital at 14th November 2006.

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4.2 Case Study: The Victims group (nine cases)

Case Study: 1

Mrs Wan (assumed name) is 54 years old. She graduated pathomsuksa 4 degree and has unemployed for 2 years. She used to sell food to workers of a weaving factoty somewhere in Samutprakarn province. Then the factory was closed on April 2548, so wan must closed her shop. Now, she gets income for her children and works for some money.

She has 8 brothers and sisters, is the third children of her family. Her 4 brothers drink alcohol everybody but nobody addicts alcohol. Her parents don't drink alcohol. There is no violence is used in her family.

Wan got married with her husband. They have two children. Now, her husband's job is a hireling tricycle rider. He has got 100-200 baht per day. In the early year, her family was a diligent man, had money, had many people who esteemed him, and drank a little alcohol occasionally. In the late 2543, her husband drank a lot of alcohol everyday because he was a lotto dealer and lost, so he had to sell his car and got 700000 baht. After he paid his debt, he had got 10000 baht left and drank a lot of alcohol. Before he drinks alcohol, he is a kindly man. When he drinks alcohol, he becomes a moody and forgetful man.

In the year 2546, he drank alcohol more then a last few years and was drunken everyday. He couldn't go to work many times and the customer didn't want to ride on his tricycle. After he had got some money from riding a tricycle, he used all of his money to buy alcohol for drinking. When he didn't have any money, he asked wan to give some money. Wan had got a little money from selling food and this money is for paying her family expenses. If she doesn't give him some money, her husband gets angry and destroys furniture in a house.

In the late 2546, her husband asked wan to give him some money but she didn't give him, so he slapped her face and that hit at base of her ear. This was happened to her many times. Wan was castigated with rude words, was threaten and was thrown with many things sometime.

Wan talked about her violent experience. It was happened when her husband asked her to give him some money for buying alcohol. After he spent all money, he asked her to give some money again and she didn't give him, so he got angry, threw a

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water flask and hit a cabinet. She said she was angry, dragged her husband to a road and hit him one time at his regions of the false ribs. He was injured for a year and didn't go to see a doctor. She used the violence with her husband that day because she couldn't bear with her husband's aggressive action. Her children didn't like their father and didn't have a relationship with their father. He and his children had an argument many times because their father was drunk. One day, they argued with their father heavily, so they threw a light bulb at their father's belly. Her husband had to sew his wounded. Wan and her husband still has a relationship because she thought of his good deed last time.

Her husband's actions have effects on her feeling. These caused Wan to feel depressingly and vengefully. Sometime, she wanted to suicide but she stopped thinking like that because her children.

Wan said that her husband didn't help her when she couldn't walk and her husband told her went to die. She felt vengefully and cried out. She said that her husband didn't need to take care of her, it was alright. This was happened in the late 2549.

In 2550, her husband drank a lot of Thai traditional vodka and didn't have any meal, so his body swelled. On the middle of January, her husband was drunk since early of the evening. At 2.00 am, he came in a room where wan slept with her 2 grandchildren. He used his foot to scratch her 2 times and she turned her back to him. After ten minutes, her husband kicked her waist and cursed her. Wan cried out and got much pain because she has suffered from degenerative bone disease of spinal column and still on treatment. She thought her husband wanted to have a sexual intercourse but she didn't want to have sex with a drunken man. She blamed him many times for his action. She had to see a doctor 3 times to cure her pain but after her husband kicked her that day, her illness was more painfully.

Case Study: 2

Mrs. Waan (assumed name) is 45 year old. She graduated pathomsuksa 4 degree. She works as padding sewer and has got 191 baht per day.

Waan has 2 brothers and a sister. She is the eldest sister in her family. Her father drinks alcohol everyday and don't have any meal. Her mother drinks one bottle in the morning and evening everyday because she has known her husband had a

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paramour. Waan's 2 brothers have an alcohol addiction and her sister has got a low blood pressure, so she has to drink alcohol to raise her blood pressure but doesn't has an alcohol addiction.

Waan talked about her memory in the past. Her parent fought each other because her father had a paramour and his paramour was her mother's friend. Her mother was very sad and didn't tell anyone about it. Her mother had to use alcohol to relieve her sadness and died because of alcohol (Waan was crying when she talked about it). She said when her father hit her mother with rubber tube, so she had to protect her mother in the past. This event has reminded her many times.

During Waan was 18-19 year old, she had the first husband who was a gallant man. They lived together without marriage for 9 months. After Waan had had a pregnancy for 5 months, she came back home in Sragaew province and never contacted her first husband again. She came back to work at the weaving factory somewhere in Samutprakarn province after she gave birth to her child. She met her present husband and got married in 2530. They have got a daughter. Her husband worked at a Steel factory and had got 200 baht per day. She knew her husband had drunk alcohol before she got married but she never thought her husband drank a lot of alcohol like that.

In 2533, her husband started to drink heavily when he changed his job to be a steel factory worker. He had a party with his friend who helped him to get this job. He had got his first salary about 1400 baht and spent 800 baht to buy alcohol for this party. After that, her husband drinks a lot of alcohol with his friends till 2.00 am after he comes back from his workplace everyday. He drinks about 5-6 bottles of alcohol with his three friends at Waan's room. When he was drunk, he makes loud noise sometime and has to credit a shopkeeper. He goes to a karaoke lounge with his friends sometime when he has his salary.

After her husband drinks alcohol, he becomes a moody and talkative person. Because of alcohol, her husband can't control his consciousness, so he always shocked for what he did when he gets over the effect of alcohol.

After wan had married for 4 years, she started to argue with her husband because he drinks a lot of alcohol heavily everyday. He couldn't pay his alcohol debt,

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so he had a fight with his friends. He couldn't solve this problem, so he used violence to his family instead. He threatened and harmed his family member.

In 2543, her husband had a new girl friend that had a husband. That women and 2 friends waited for Waan's husband in front of a factory at 11.00 pm. Waan had known about this from her friends, so she waited for her husband too. After they met each other, they had an argument and Waan was very angry because her husband sided with that women. She asked him about excessive family expenses, so her husband was angry very much and slapped her face one time in that night. In the next morning, her face swelled up and was sorely. Her husband woke up and asked her why her face has wounded. She answered him it was him, so her husband brought her to see a doctor. While she was going to see a doctor, she had to cover her face with a cap and a piece of fabric because her husband was ashamed. She had got pain at her body and mind. After six month passed, her husband threw her at house's door and her head hit at a door edge, so her head was injured. She was taken to a hospital. This was happened because her husband had a problem with his workplace because of drinking alcohol. He was very angry when he came back home, want to drink alcohol and asked her to buy alcohol for him but she denied, so her husband threw her. Alcohol is a cause of the violence that makes her husband loses everything and his future. She said that her husband used violence continuously but wan learned how to protect her to ensure it wouldn't happen again.

Drinking alcohol is cause of her husband's irresponsibility in his family. He only wants to drink alcohol and spend a lot of money for it. If he doesn't have any money, he loans some money. The family relationship is changed and he doesn't take care of his family. He always goes out with his friends and drinks alcohol. Her children had to accept their parent problem and Waan had to stay and teach her children.

In the early 2549, Waan had a severe argument with her husband from 23.00-1.00 because her husband wanted to loan some money to make a party with his friends. She stopped him buying alcohol. Her husband castigated her with many rude words. She told her husband to divorce with him for the future of her children. She was very sad and her daughters cheered her up.

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Her husband actions have effect on Waan and her children's mind. They felt depressed, sad and serious. She didn't want her children to have a bad family. His actions had not only effect on her mind but also effect on her health. She had to see a doctor many times and took a lot of medicine to cure her illness.

When there had violence in her family, she kept it alone and needed to have patience. It was family problems. Nobody can help her, especially about money.

Case Study: 3

Mrs. Toi (assumed name) was 30 years old. Her education level was primary school. She was a waged worker of a factory producing clothes. By doing this job, she could earn 191 baht a day. Among four children in her family, Toi was the third one. Her father and two older brothers could drink alcohol, while her mother rarely drank because of her hypotension. However, none in her family was addicted alcohol.

Toi started married life sine 1999. She had one child. Her husband worked in the same factory, but his wage was about 200 baht a day. She knew before wedding that her husband addicted to alcohol. Since they got married, the husband drank everyday mostly at friends' room.

The first time of domestic violence was in 2002, causing by extra-marital relationship of her husband. After being together for 3 years, the husband drank heavily from 4 p.m. after work to early morning. This problem occurred frequently. Toi complained that **"Like I am alone."** After drinking, her husband was always moody, disliked when people asked or even talked with. The husband claimed that Toi complained him too much. When Toi asked "Where were you?" he replied that **"You are housewife, responsible to stay home. Don't' say and don't follow me"**. The truth about his minor wife was discovered during the second month of Toi's pregnancy, while the minor wife, who worked in the same department as the husband, had gotten pregnant for 5 months. When Toi fought with the minor wife, she was scolded and slapped by her husband. Toi also fought with her husband.

"He said that "If you are unsatisfied with me, we can divorce. You just go and look for the new better husband." He said that he is not a good husband; he drinks alcohol and goes to prostitute."

Later on, the husband separated from his minor wife because that girl had to go back her hometown and stayed there. Again, within the same year, the husband had

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another girl aged 17. This girl also worked at the same department as her husband. She knew about their relationship when that girl's relatives called police to arrest the husband. Since the husband committed illegal action by having sexual relation with young girl lesser than 20 years old, he was imprisoned 8 days and had to pay 30,000 baht to the girl.

Toi told that she frequently had quarrels with her husband causing by drinking alcohol and adultery. Her parents also wanted her to divorce, but she was afraid that a divorce might impact on her 4-year-old son, who lived with his grandparents in country area.

In 2003, Toi had a destructive quarrel with her husband when the husband was jealous of her in a party of their factory. The husband pulled her from the food table she was sitting in to fight with her at their room. **"He claimed that I had another guy. He is adulterous. He was afraid that I will be the same."** It was the destructive fighting. The husband threw many objects to Toi. Both of them threatened each other by showing knifes. **"He had one. I had one also."** The husband kept Toi in a locked room; Toi could come out when the room was unlocked by her sister. Toi wanted to go back home but she did not have money. So, she had to endure living with the husband.

The most destructive violence was occurred last 3 months in October when her husband was drinking alcohol with friends in front of their room. They drank from 6 p.m. to 11-12 p.m. and played guitar loudly. Toi needed to go to bed because she had to go to work early in the next morning. **"It was annoying. I couldn't sleep. I complained him and he said that I should not make his friend felt uncomfortable."** The husband used power to slap and kick her and she also fought back until their neighbor came to stop them. Toi felt that such situation often occurred and she was pressured by that. The husband drank everyday. She did not know how to live. One time, she decided to go back to her parents and went out of the room with 1,000 baht. But her husband took that money from her saying that **"If you want to go, you can go but don't take money with you."** Toi came back to the room and fought with him until late at night.

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Case Study: 4

Mrs. Sri (assumed name) was 34 years of age, completed primary school as her highest education. She earned a living 280 baht daily by working as worker of a factory producing clothes.

In Sri's family, she was the oldest among 3 children. At her age of 7, her mother passed way; her father married with the new wife. Therefore, Sri and her sisters moved to live with their aunt. They were well cared by the aunt; both of her sister got good jobs. In her family, none but her father used alcohol.

Sri became a married woman in 1993. Her husband was 37 years old. He left school when he completed Prathom 6. He was pick-up driver and could earn 10,000 baht a month. Since he was married to Sri, he used alcohol a little. But after they got married for one year, the husband drank heavier. With his severe drunkenness, he did not clean his body that made him smelled badly. The problem of severe drunkenness happened when his friend came from Srisakate, where was the hometown of the husband, to visit him. He, together with 3-4 friends, drank color liquor everyday. They, sometime, did not come back home for 1-2 nights.

When the husband drank, his behavior and emotion were changed to be self-interested and impolite. **"He more cared and respected those who drank with him than family members."** Also, he was aggressive. **"When he was drunk, he was so cruel. I couldn't say anything. Otherwise it could be a big deal."** He lacked consciousness that made him unable to control emotion.

About one year after marriage, Sri was battered by the husband because she said that she still not ready to have children. She told that her husband asked her badly that **"You don't want to have a baby with me because you have another guy, don't you?"** Her husband was drunk and felt jealous with her.

"I wanted to divorce but his father asked me to stay. Then, parents of both sides gathered and make a solution, saying that if I was physically abused I could separate."

Later on, Sri and her husband fought with each other 2-3 times a month. This because the husband drank alcohol and spoke to her rudely, using the words 'mueng-goo' and sometimes threatened to kill her.

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“He threatened to shoot me if I had another guy or divorced him. But he did not beat me.”

After 2 years of marriage, Sri had one son. This made her husband drank lesser than before. **“If he doesn’t drink, we won’t have any quarrel.”** Later on, when the son grew up at the age of 9-11, the husband drank heavier. The husband claimed that he got stress. Sri did not know what made her husband stress. The husband drank 1-2 bottles of beer everyday from 5.30 p.m. to 7.30 p.m. In addition, he drank one more can of beer before meals. Whenever Sri complained about drinking, they fought each other.

“It depended on whether or not I spoke out. If I didn’t want to have a quarrel, I had to pretend like I didn’t see.”

Sri continually had quarrels with her husband; she had never used rude words. She felt stress, disappointed and worried that made her got severe headache which could not be cured by normal drugs. She always solved the problem by herself by going to see doctor alone.

On 20 February 2007, Sri had a violently quarrel with her husband. The husband drank at home for 2 hours from 8 p.m. to 10 p.m. and went out to drink more at karaoke. Until 2 a.m., he came back because Sri called him twice. When Sri asked him about the place that he went to and reason of going out, he answered that his friend came to visit him so that he had to take care his friend. They fought loudly and the husband used rude words like ‘mueng-goo’. The husband also challenged her to divorce. He dragged off her arm with force, threatening her that **“I will slap at your face with my foot**.” They stopped fighting at 3 a.m. Sri was very stress from that situation, including having less money for the son’s secondary school study. **“I cried one hour in toilet and went to bed at 3.30 a.m. but couldn’t sleep until morning.”** She consulted a lady who was the chair president of a women support center that made her felt better. She did not speak to her husband for 3 days, going to work by herself and had meals at her factory. Until the forth day, the husband asked her…

“He [husband] asked me “Have you had dinner? Do you go to work tomorrow?” but I didn’t care and kept quiet.”

Sri worried about her 12-year-old son. She thought that **“If the son comes back home to stay with us this coming summer and sees his dad gets drunk, I am**

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afraid that he will worry. I worried about many things." Although the husband drank everyday and it affected relationship within family, Sri did not divorce because she loved and cared her husband. She worried that her husband might get trouble if he lived with other people since he could not be easily understood. She also thought that **"I still opt for monogamy. I don't want to create trouble for my son. It may be difficult for him to get along with the new father, if I married again."** So, she decided to endure living with her husband in order to make her son happy.

Case Study: 5

Mrs. Nid (assumed name) was 53 years old. She left school after she completed Prathom 4. As a waged worker, she could earn a living 10,000 baht a month. Some days, after work, she also made extra money 300-400 baht a day by selling fish and roasted squid. She was the youngest among 10 children of her parents. Most of her relatives drank alcohol but none of them, except her father, addicted it. When the father was drunk, he scolded the mother because of jealousness. He sometime practiced wife abuses that made the mother felt sad. He spent all money he earned for drinking. He even sold cows and buffaloes he had just for buying alcohol.

Before living with the present husband for more than 10 years, Nid was a married woman with 2 children. Her former husband died of accident so she married again with a man, who was a taxi driver that time and also had 2 children with his former wife. The present husband drank alcohol everyday. Normally, he was a kind and quiet man, who always helped Nid to do housework. After he drank, he became a moody and anxious man. Whenever he drank, he scolded Nid abusively because of jealousness. He accused Nid of practicing extra-marital relations. Too much alcohol consumption made Nid's husband did things with unconsciousness. For example, he spoke without thinking; he could sing as he had never done before.

Nid told further that since her husband addicted alcohol, she often had family problems and had never lived happily. The husband always scolded Nid when he was drunk. He also threw objects to hit Nid if Nid refused talking with him. Additionally, every time Nid went away, her husband asked her to come back. Quarrels between Nid and her husband often occurred, resulting in drinking alcohol**. "He will be in mood if he drink, scolded me rudely that "You have another man. I will beat you! Fuck you!"** Nid fought with her husband every week. She could not talk with any man

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because her husband was jealous with her. She showed the wounds on her eye brown which was injured by her husband using a glass to hit her. Sometimes, she also drank alcohol.

“Sometimes, if I came back early and saw that he was drinking heavily, I also drank it just to help him finished it. When I got drunk, I couldn’t control my mood and felt anxious without reason. That feeling, including pressures I had before drinking, made me scolded him that he was bad.”

Nid drank with her husband many times, but not every day since she worked until late night sometimes. She got drunk when she had alcohol. She also drank with friends in some occasions like New Year party. She told her husband that **“It is my turn to join party, meeting with friends. Cause I work hard and so tired, want to relax.”**

Last 5-6 years, the husband got angry easily after drinking a little bit of alcohol. She was accused of having another man when she refused to have sex with her husband. As a result of violent fight between Nid and her husband, she was struck at face. That made her admitted in a hospital. **“It is because of alcohol only. Drinking alcohol destroys many things.**” Her husband beat her again after drinking alcohol. He was jealous with her and slapped her ear loudly during fighting. This physical abuse resulted in ill health she had been suffered since that time up to now. She often got earache causing by the noise like thunder in her ear that made her could not sleep some nights and had to go to see doctor.

It had been 3 years that her husband was pressured by constraints related to money. He had to pay a debt for buying a new car by installment. He intended to use that car as taxi to earn a living. But since he was deceived that the car was new, he had to spend a lot of money repairing it. This made him got severe anxiety, and even more pressure when he could not pay a debt and had to return the car to the bank he was loaned. He could not drive because of his poor mental health status that made his brain work badly. He also drank heavily, having white liquor 1 ¼ bottle everyday. Nid asked him not to drive since it was so dangerous for him. She told about his drinking behavior that **“Once he woke up, he immediately drank alcohol. If he got up 4 a.m., he drank it 4 a.m.”** As he could not earn money, he bought alcohol using money from Nid. He spent a lot for alcohol. If Nid denied giving him money, he

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shouted madly **“You are heartless, not give me money.”** Nid had to hide money from him, not let him took it away to buy alcohol. One time she told police to arrest her husband after she was battered on a main road and her eye got blunt trauma. Her husband was imprisoned for one day, while she had to go to a hospital because she was afraid of getting blindness. She told that the reason that her husband beat her was only drunkenness that led jealousness.

Drinking alcohol ruined responsibility and relationships in family. Principally, husband must be the leader of family. But Nid’s husband was drunk awfully, could not work and earn a living, had a debt, and even was not responsible for what to eat tomorrow.

“I want him to be a patient stay at hospital for a long time, I will be happy for that. Sometime I want him to die today or tomorrow. My son doesn’t respect to his father. He has never visited his father at hospital tough I asked him to come sometimes. “let him [father] die of drunkenness”, my son said to me.”

After her husband got ill health and weakness, it was rare for them to fight or use power to hurt each other as same as they did before. Nid brought her husband to several hospitals, such as Sirirat hospital, Kasamerat hospital, and so forth. But the husband still drank whenever he was discharged from those hospitals. He was discharged from Taksin hospital last December.

In January 2007, Nid took him to be treated at Tanyarak Institute. She had to tell him a lie that she wanted him to visit the daughter. When they got to the institute, her husband got angry with her. He scolded her that **“You do it again, Nid. You take me to hospital again. I don’t get mad, why do you bring me here.”** The husband also tried to punch Nid, but Nid was not hurt because she slipped away and someone came to stop the husband. Furthermore, when the husband was admitted in the institute, he shouted loudly to call Nid as animals. He scolded Nid rudely and tried to beat her again.

Case Study: 6

Mrs. Ooi (assumed name) was 40 years old. Her highest education was Prathom 6. She worked as a waged worker at a garage; she monthly gained 5,000 baht as her salary. Her parents had 6 children. Her father and brothers drank alcohol, but not addicted to it.

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Ooi lived with her husband and 2 children. The husband worked as a truck repairer at the same garage as her. The garage's owner paid him 300-400 baht each day. But he lost that job and did not work for 2 years. Ooi knew that her husband drank sometime before the marriage. Usually, if the husband did not have alcohol, he was a kind and good person who loved his wife and children. Family problem was occurred after 5 years of marriage causing by drunkenness of the husband. When the husband was drunk, he became a bad-tempered person and liked to make noises. Such problem induced Ooi to complain him that always brought about quarrels and battering. The husband could not remember all what he did because of drunkenness and when he was sober **"He only said that he didn't know, couldn't remember."** 5-6 years ago, the husband drank at home with friends from 6 p.m. to around 8-9 p.m. They made noises; the husband asked Ooi to do many things for them and scolded her rudely if he did not get what he wanted. Ooi felt angry because it was the time she needed to go to bed. They therefore had a violent and noisy quarrel. Ooi tried to hit her husband with a cloth hanger but the husband punched her making her forehead become green. Ooi felt embarrassed about her face and did not go to work. The severity of domestic violence was even increased last 2 years when the husband drank a lot and had another woman. He drank a half bottle of white alcohol everyday and could not work well. That resulted in being changed position. He finally quitted the job. Ooi asked her husband to make cooking oil for sell and bought all equipments for him in order to make him concentrated in working and not to be temperamental. The husband did that job for 2 months and abandoned it. Ooi had to sell all things she bought for that. Since the husband had no job for 2 years, he used money got from Ooi 1,500 baht a month. He scolded Ooi rudely if he did not get money. Mostly, the husband lived with his minor wife. He stayed with Ooi only 1-2 days a week. Once he came back, he always forced Ooi to give him money and used power beating her sometimes.

As a result of being addicted alcoholic and having extra-marital relations, relationship in family was changed a lot. The husband estranged family. Oye said with sadness, **"I have karma. If I have time I often go to make a merit… My husband can't get a long with the son. In the past, the son was the most important person for him."** Ooi looked sad and worried when she said that words. Her relatives

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suggested her to divorce, but she did not. **“I don’t want my son to be unhappy. It is better for him to have both mother and father.”**

The last violence was the severest one which was occurred on 16 December 2006. On that day, the husband drank white liquor with friends for almost the whole day. He was drunk and scolded Ooi, not allowed her to go to work or even do anything. **“I felt hurt in my mind.”** Ooi called police to arrest her husband. The husband was in the prison for one night and was sent to hospital later. Ooi planned to divorce if her husband still drank.

Case Study: 7

Mrs. Kon (assumed name) was 53 years of age. She did not continue studying after Prathom 4. By working as a shopkeeper at her own glocery store, she earned irregularly from 300-3,000 baht a day. She also owned business on 10 rental rooms and gained 15,000 a month. However, she had to pay for monthly debts about 7,000 baht, including other expenses. She also looked after 2 nieces, who were 10-year-old twins of her son. She came from a warm family. Her parents had 6 children. One of her younger brothers was alcoholic.

Kon and her husband got married in 1973. Both 2 children grew up and had their own jobs, while the husband, who had Prathom 4 as the highest of his education, worked as a shopkeeper as same as Kon at home. Kon’s husband was a quiet, cool, and responsible person. Normally, he did not like chatting. After drinking alcohol, his behavior and emotion were changed to be more talkative and temperamental. He always scolded wife, children, and nieces without reason and conscious.

2 years after the marriage when Kon got the second child, her husband began to addict on alcohol and had another wife. During that time, she worked in a factory as waged worker, gaining 200 baht for each 8 hours of duty. Her husband also did the same job in another factory. Domestic violence was started when the husband was in mood during drinking alcohol. Whenever he drank, he had a quarrel with Kon. Once he came back home, he immediately fought with his wife.

“He sees me as his antagonist. He always complained about foods I cooked asking that “What did you cook? You cook by using hands or feet?” He [husband] was afraid that his fault might be discovered. Actually I was already told by his colleagues, but I did not sure about that.”

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One day, Kon told a lie to her husband that she was on duty at night. After she pretended to go to work for a while, she came back home and found that the husband stayed with another girl. She talked with that girl **"Why you stayed here in my house? Why don't you sleep at hotel, there are several. If you don't have money, you have to sleep beside roads. You know that he [her husband] is married."** Yet, that girl still came to her house many times. When Kon asked the girl that **"Don't you understand what I clearly told you", she was replied "You have to tide your husband"** Kon fought with the girl. She pulled the girl's hair, slapped at face of the girl, and pushed the girl into a small river. Nonetheless, Kon gave her cloth to the girl to change. The husband saw that event but did nothing, just said that **"Don't fight each other."**

The relationship in family was changed since the husband was alcoholic and had another woman. The husband was temperamental, aggressive and ferocious, using rude words to scold. **"I did all best things for him but he still complained."** Kon faced the problems of alcoholic addiction and extra-marital relation of her husband for 1 year. She fought with her husband every week. She had to endure for that. When she was pressured by the situation, only crying she could do because she lived with her husband's family, which included the husband's parents. **"If I did thing as violent as he did, I might be a black sheep in his family."** Kon remembered her father's words…

"Do the best to complete housework, don't make mistake. Keep quiet, no matter what they say or act. Don't say about the past, just keep going forwards. Tongue and teeth can be struck to each other all the time. It can be healed by both of you helping each other. Think carefully before doing; don't make a decision without thinking."

Kon always warned herself with those words in order to do all housework without mistake that made him came back to her in 1984.

Her husband's behavior affected her mental health. She said, **"It is more than hurt. I don't understand why I am not good enough for him. Am I bad? Or did I make any mistake. I have never requested for money, never asked about salary."** Kon thought about committing suicide, wanted to leave from all problems. She cried at night, thinking that **"If I die, how do my children live since they are so**

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small." She, together with her 2 children, moved to live with her mother once; they all returned to their home finally following to the request of her husband and her father-in-law. Though Kon wanted to divorce, she decided to be patient otherwise her children might undergo broken family that she was afraid of.

In 1984, Kon was diagnosed as having cervical cancer and got hysterectomy. Her health condition partly led to some positive changes in which the husband treated her better than before. **"He admitted that it was his fault that he went to prostitute and brought a disease to me."**

In 2000, Kon lost her job since the factory was closed. She then helped her husband in their small grocery store. Throughout her married life, Kon felt so much tired in facing with terrible fates. Even though the husband stayed at home helping her in both selling and doing housework, his drinking behavior had never changed, and even severer than before within last 2 years. The husband drank 1 ½ bottle of Sangtip (color liquor) with 3 friends everyday. Though he was drunk, his emotion and behavior were changed. He got angry easily; it could become a big deal if he did not satisfy. For instance, when a customer came to buy a good and Kon asked him about the price, he replied moodily **"What? You have sold for many years, but still forget. You are buffalo! If I am not here, how will you do?** Kon cried sometimes. She always kept quiet in her mind. During New Year her husband drank more than usual. He could drink throughout a night if he drank with friends at home.

In 2006, the husband drank a lot and was bad-tempered as same as before. He always unsatisfied and got angry whatever Kon or anyone did. Moreover, the husband scolded and beat his nieces several times. When the husband was in mood and did not speak to Kon, Kon had to be cool and patient. She realized the words she was taught **"To stop fire, we need water."**

Case study: 8

Mrs Sorn (assumed name) is fifty Three year old. She graduated P.4 degree and works at the photo framing factory. Her income is 215 bath/ day and she gets 6600 bath/month by room renting.

Mrs Sorn, has 9 sisters and brothers, is the eldest sister. Sorn's family doesn't drink Alcohol and doesn't use violent against each others. Her sisters and Brothers have good jobs.

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Mrs sorn married with her husband when she was thirty year old and they don't have a child. Her husband is unemployed now. Before she married, her husband drank alcohol a lot. The reason that she married with her husband was she wanted to help her husband stop drinking alcohol. After married, she has managed her family income and her husband didn't drink alcohol too much.

After 3 years past, her husband drinks a lot everyday. He drinks one kratingdang bottle of thai traditional vodka (1 kratingdang bottle = 1 gag = ¼ round bottle) in the morning and evening everyday and buys 2-3 round bottles of thai traditional vodka sometime. He was fired because he drank alcohol when he was working. Her husband is a good person when he doesn't drink alcohol. After he drinks alcohol, he makes loud noise and turns to an aggressive person.

Mrs Sorn told that her husband couldn't control his consciousness after he drank a lot of alcohol. He destroyed everything in the house. If he didn't have something that he wants, he always knocks her head with house's wall. The violent occurred in our family because her husband drank a lot of alcohol and she think the violent was a normal situation that happen in her family. Her husband didn't like her mother because her mother always blames him.

In the early 2549, the photo framing factory owner gave 1000 baht to him. He was happy very much so he had has an alcohol party with friends since the New Year 2549 and spent all of his money. In October 2549, her husband asked her to give him money but she didn't have any money. She argued with her husband so he hit her shoulder and kicked her back. She fell down a ladder. She wanted to divorce with her husband because she was tired and weak. She asked her husband about the divorcement but he didn't want and threatened her. She afraid very much so she decided to stay with her sister for 2 days.

The action that her husband has acted with her for long time has an effect on her mental and mind. Sometime she felt vengefully. Sometime she wanted to suicide. She had got headache and went to see a doctor many times. This affected on her health a lot because she has got diabetes and she had to patience in every situation that happened to her by thinking it happened because her bad luck. Sometime, she took counsel with the village chief's wife and was given an answer that she should has more patience.

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Case Study: 9

Mrs. Saijai (assumed name), is 18 years old and gets M.3 degree, works at weaving factory. She can earn 191 baht per day.

Saijai is eldest sister from 3 brothers and sisters. Her parent has separated since she was 3 year old. She lived with her father and a stepmother while her brothers and sisters were brought up by her mother. In her new family, her stepmother drank alcohol almost everyday.

After she completed M.3, Saijai, 15, moved to Prapadeang, her father's hometown, to work at a towel factory. At the factory, she met her boyfriend who worked in the same department. She has cohabited with her husband for 2 years. At present, her husband is 25 years old with M.3 degree. His income is 6,000 baht per month. Saijai knew that her husband drank alcohol everyday before she decided to cohabit with her husband. She said that if he got drunk, he would quarrel, hit, and throw a knife or a bottle. However, she chose him as her husband because he was a nice person if he didn't get drunk.

In the first year of cohabitation, her husband drank alcohol 4-5 days per week. The kinds of alcohol he drank were color alcohol, and beer (sometimes). He often drank alcohol from 6 P.M and 4 A.M. at his friend's house. After he drank alcohol, his behavior would change; aggressive, talkative, and uncontrollable himself. She said that he would curse other people when he drunk.

After the first year of cohabitation, Saijai and her husband disputed a lot. The cause of argument was her husband liked to drink alcohol at his friend house. When Saijai told her husband to go home, he felt annoyed. Then, he slapped her face, hit her stomach, stroked and pressed her arms. Although she got a wound, she didn't go to see a doctor because she was shy. She and her husband got fight 1 – 2 times per week. Her husband always destroyed things in his house when he got drunk. Saijai could not ask him some questions such as "Where did you go?" If she asked this question, he would attack her. Therefore, relationship in the family was cold and stressful. The responsibility of the family was backward.

In the middle of year 2006, Saijai was attacked by her husband. Her husband cursed her, pressed her hand, and strangled her neck. Then, she strived but her husband pushed her on a floor. She laid on the floor, so her husband stopped. Her

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husband attacked her because she asked him “Where did you go? Why you don’t take care of me?” From this situation, she felt stress. She would like to escape from her husband but she couldn’t leave him. Saijai didn’t dare to tell her problem to anyone. She though that telling her problems to others was criticism herself and she was shy that people would gossip her.

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CHAPTER V
ANALYSIS & DISCUSSION

In this study, the research aims to study the pattern of alcohol consumption on domestic violence in partnership and the extent of violence in family. This section can be divided into 3 main parts as follows:

5.1 Personal Information of perpetrators and victims

5.2 Alcohol consumption patterns that affects violence

5.3 Characteristic and level of domestic violence

5.1 Personal information of Perpetrators and Victims

The research studies alcohol consumption affecting the domestic violence problems from the sample group of 17 people, in which 8 are perpetrators in domestic violence who attend rehabilitation at Thanyarak institute; 2 are victims from domestic violence whose husbands attend rehabilitation at Thanyarak institute; and 7 are victims from domestic violence who have approached Friends of Women Foundation for help and support.

It is found that the sample group of perpetrators consists of 1 male aged 25, 4 male aged ranges 30-40, 2 male aged ranges 40-50, and 1 male aged 54. In respect of education, 4 finished school year 9, 1 finished TAFE level, 2 finished years 6 and 1 finished year 4.

In terms of occupation, 3 of them are tradesmen- (1) an electrician on 180 baht a day income (Keit, aged 25, interviewed on 05/01/2007), (2) a house renovator, working with a son, on 10,000 baht a month income (Tim aged 47, interviewed on 25/12/2006), and (3) a metal factory worker on 6,000 baht a month income (Suk, aged 30, interviewed on 5/01/2007). 2 are self-employed- (1) a barber, earning 1,000 baht a day, less monthly rent and other expenses, totaling 18,000 bath a month (Chai aged 39, interviewed on 29/12/2006). (2) a takeaway food seller, earning approximately 40, 000 baht a month, less 30, 000 baht monthly rent (Sak aged 39, interviewed on 26/12/2007). 3 are unemployed- (1) a former forklift worker, who used

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to earn around 20,000 – 30,000 baht and have been out of work for 5 years. “I was so ill and weak and looked yellow. He eventually got sacked from work” (Dah aged 39, interviewed on 4/01/2007); (2) a former taxi driver, who is now unemployed for 3-4 years as his wife stopped him from driving taxi due to his heavy drinking behavior (Wong age 54, interviewed on 11/01/2007); (3) a former auto repair worker, who earned 300-400 baht a day and quit work because he was not happy that he got moved to another job due to his heavy drinking (Tup aged 40 interviewed on 25/12/2006.

In respect of family history on alcohol consumption, it is reviewed from the study of 8 male perpetrators that 4 have brothers or sisters who drink alcohol; 2 have brothers or sisters who are addicted to alcohol; 2 have fathers and brothers who drinks alcohol. 1 has a mother who is alcoholism; and 1 does not have any family members who drink or addict to alcohol.

Alcohol consumption involves a number of factors, including genetic factors. There are correlations between having parents who are alcohol dependants and alcohol dependence in their children. The physical and psychological effects of alcohol are other factors that influence alcohol dependency. Alcohol dependency is also influenced by individuals’ personality, mentality, adaptability, problem solving skills. Social and environmental factors include upbringing and imitation in the family, peer pressure. In the study, it reviews that peer pressure has more impact on alcohol dependence than having parents who drink alcohol.

Some of the interview dialogs in relation to peer pressure Vs alcohol consumption of parents on alcohol dependency are shown below:

‘I don’t think (having parents who drink alcohol) is a relevant factor in my case. I drink because of friends.’ (Tim, aged 47)

‘I don’t think it is related as my parents are not alcohol drinkers. I’ve got it from friends’ (Chai, aged 39)

‘I drink because of stress, loneliness and my friends invited me to drink everyday.’ (Wong, aged 54)

‘Socialization with friends plays more important role (on alcohol habit) that seeing parents drinking it’ (Sak, aged 39)

‘Not that I like alcohol. I got persuaded to it by friends’ (Keit, aged 25)

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‘Not true. Some parents drink, but their children rarely touch it. I think it is more related to friends, environments and personal problems’ (Suk, aged 30)

In the study, there are 2 cases where upbringing and having parents who drink alcohol have led to behavioral imitation.

‘It is up to upbringing. I have never actually seen my dad drink alcohol, but I saw him walk like a drunk. (Tup, aged 40)

‘If the parents can drink, why I can’t’ (Dah, aged 39)

In the study of the victims- 9 females, it is found that 4 are from over 50 years old age group, 2 are from 40-50 years old age group, 2 are from 30-40 years old age group, and the youngest one is 18 years old. All of them have low education level- 5 of them finished Year 4 school level; 3 finished year 6; and 1 finished year 9.

In terms of occupation, 7 victims are blue collar workers that are textile factory workers, earning around 191 baht a day on average (Saijai, aged 18, Toi, aged 30, and Waan, aged 45); a photo framing factory worker, earning around 215 baht a day (Sorn, aged 53); a textile factory worker, earning 280 baht a day (Sri, age 34); an auto repair worker, earning 5,000 baht monthly (Ooi, aged 40); a road maintenance & cleaning worker, earning 10,000 baht monthly. One victim runs her own food business and apartment rental business. She earns 300 baht a day on week days, 3000 baht a day on weekend and earns 15,000 baht from apartment rental, including some miscellaneous work (Korn, aged 53). The last victim is an unemployed due to the textile factory closedown in 2003. (Waan, aged 54)

In respect of alcohol consumption of immediate family members, it is found from the study of the 9 female victims that 4 victims have fathers and brothers who drink alcohol, 1 victim has a father who addicts to alcohol; 1 has a brother who addicts to alcohol; 2 have mothers who drink alcohol; and 1 victim has both mother and father who addict to alcohol. “My dad drank alcohol everyday. He would not eat and mom would drink 1 bottle of alcohol in the morning and 1 in the evening.” (Waan aged 45); 1 victim whose all her brothers drink alcohol; and 1 victim whose none of immediate family members drink or addict to alcohol.

All of the 9 victims have husbands who drink alcohol, in which 8 of them knew that the husbands drank alcohol prior to marriage or living together. For one victim, her husband started alcohol drinking habit after the first child was born

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(Korn aged 53). Despite being aware of their husbands drinking alcohol prior to marriage, they still chose to marry or live with the drinkers for various reasons.

"I did not think that his drinking habit would get worse. I just wanted to help him quit drinking." (Sorn aged 53, interviewed 5/02/2007)

"He is a drinker prior to our marriage, but I did not realize he would be drinking alcohol this much." (Wan aged 54, interviewed on 21/01/2007)

"After he drinks, he would have a fight with other guys like throwing knives and bottles to one another and end up in hospital. I chose to marry him because of his good sense of humor." (Saijai aged 18, interviewed on 5/02/20007)

From this research I found that factor of personal information of perpetrators and victims on domestic violence were age, education, occupation and income.

Age: For perpetrator group, I found that minimum age of perpetrator was 25 years old and maximum age was 54 years old, range of age between 39 to 54 in 6 perpetrators and between 25 to 30 in 2 perpetrators. For victim group, I found that minimum age of victim was 18 years old and maximum age was 54 years old, range of age between 40 to 54 in 6 victims, between 30 to 34 in 2 victims and at 18 years in 1 victim. The perpetrators and the victims have the same range of age that is adolescent that correlate to the study of Donnapa Hongthong(1999:117) and Kamonporn Paitcheep(1999:117). The studies of those found that there is the incident of domestic violence of the older husbands more than the younger husbands'. Moreover, the older wives have the incidence of domestic violence more than the younger wives that not correlate to the study of Straus and others (Straus, et al,.1980 cited in Donnapa Hongthong) that the age of the couple relate to domestic violence; the younger couples (below 30 years old) attack their spouses more that the older couple.

Education: the researcher found that the 5 of the perpetrators graduated in Mathayom 3 and TAFE and 3 of perpetrators had Pathomsuksa 4 and 6 degree. For the victims, 8 of the victims graduated in Pathomsuksa 4, and 6, 1 of the victims graduated in Mathayom 3. It can explain that the level of education effects domestic violence because the educated people have better way to solve a problem and use more reason that agrees with the study of Kamonporn Paitcheep (1999:110). Kamonporn found that 42.86% of husbands in the sample group got mathayom degree

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or below and 57.14% of wives got mathayom degree or below. That is also the same as the study of Donnapa Hongthong (1999:118) that there was incidence of domestic violence in the group of wives and husbands who got Pathomsuksa degree more than the group of wives and husband who got Mathayom degree. However, the study of Valrung Navaboonniyom (2001: 76) found that the domestic violence in wife can happen to every group of age, education, and occupation.

Occupation: the occupations of the perpetrators that was found in this research are workers (3 people), unemployed (3 people), and hair-dresser (1 people). For the occupation of the victims, 8 of the victims are worker and 1 of the victims is merchant. From the research, we can conclude that the occupation relates to domestic violence. Some of occupation make tension and have low income that lead to economic problem in the family. According to the study of Kamonporn Phaetchip (1999:110), 33.12% of husbands and 29.87% of wives in the sample group are worker. That is difference from the study of Budsarin Klongpayaban (1999:164) that the occupations of husbands and wives are not related to domestic violence.

Income: From the research, 2 of the perpetrators have income 5,000-6,000 baht and 4 of perpetrators have no income (unemployment). The victims have income 191-280 baht per day (5 people), 5,000 baht per month (1 people), 10,000 baht per month (1 people), and unemployed (1 people). Both perpetrators and victims have low income and unemployed that can lead to economic problem that is one of the factors of domestic violence. That is the same result of the study of Kamonporn Phaetchip (1999:110). Kamonporn found that 65.58% of husbands and 74.68% of wives earns less than 12,000 baht/month. According to the study of Dolnapan Hongthong (1999:119-120), women who have low income face incident of domestic violence the most, follow by women who have medium income and high income. Moreover, domestic violence occurs in women that her husbands have medium income the most, follow by women that her husbands have low income, and women that her husbands have high income. That is difference from the study of Busarin Klongpalabal (1999:164) that income of husbands and wives are not related to attacking wife from husband.

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5.2 Alcohol consumption pattern that affects violence

The study has found that alcohol consumption pattern has 4 elements as follows:

5.2.1 Starting age for alcohol consumption

5.2.2 Duration of alcohol consumption

5.2.3 Alcohol consumption behavior

5.2.4 Behavior after drinking alcohol

5.2.1 Starting age for alcohol consumption

From the study, all of the 8 perpetrators in domestic violence from the interviews started drinking alcohol before the age of 25 and have attended rehabilitation for alcoholism. The heath conditions include insomnia, hallucination, anxiety, and irregular heartbeat. 3 started drinking alcohol at the age of 20 as a result of peer pressure. 2 started drinking at the age of 18 due to peer pressure. 1 started drinking alcohol at the age of 22. He used to be an Amphetamines addict, but in 2003 Amphetamines got swept off the market due to the strict government measures. He switched to alcohol instead. 1 started at the age of 17 and 1 started at the age of 15 due to peer pressure.

From this research I found that early starting age between 15 to 22 years old correlated to the study of Sompop Reungtrakun found that early start drinking contributes hazards and the high risk of alcoholism. The group of people who starts drinking alcohol before the age of 25 has tendency to addict to alcohol earlier and tend to develop bullying behaviors such as physical attack, assaults, moodiness, irritability, false sense of confidence and power. The group of those who started drinking after the age of 25 does not have history of bullying or physical assaults. They are more likely to drink for social reasons and their personalities tend to be rather calm and worried. Alcoholism often occurs between the age of 25 and 35 and the majority of psychiatric patients related to alcohol are in their late $30^{th.}$. (Sompop Reungtrakun, 2003: 35-37). And research from NIAAA found that 46 percents of drinker who developed alcohol dependence began drinking at age 16 or younger. The results of study support the need to take measure to delay alcohol consumption by underage youth.
(http://www.niaaa.nih.gov/NewsEvents/NewsReleases/earlydrinking.htm).

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In the study of 9 victims, the starting age for alcohol consumption of their partners/husbands is unknown, therefore is not included in this study.

5.2.2 Duration of alcohol consumption

According to the study of 8 perpetrators from the interview, it is found that 3 have drunk alcohol for more than 10 years, 3 for more than 20 years, 1 for more than 30 years, 1 for 4 years. The sample group consists of patients who attend alcohol rehabilitation at Thanyarak institute. One of the samples has attended alcohol rehabilitation 6 times (Wong aged 54, who has drunk alcohol for more than 30 years). 1 attended rehabilitation 4 times (Sak aged 39, who has drunk alcohol for more than 20 years). 1 attended rehabilitation 2 times (Tup aged 40, who has drunk alcohol for more than 20 years).

From the study of a group of 9 domestic violent victims in the interview, all of the victims have husbands or partners who have been drinking alcohol for over 5 years. 4 victims have husbands or partners who have been drinking alcohol for over 10 years. 2 victims have husbands or partners who have been drinking alcohol for over 20 years. 3 victims have husbands or partners who have been drinking alcohol for over 30 years.

“The symptoms include talking to myself, auditory hallucinations, paranoia. It has been like this for 3 days. I can not sleep.” (Sak, aged 39- details from the patient charts)

“On 18 December 2006, I intended that this would be the last day I drank. I drank alcohol in the morning, but not in the afternoon. Around 4 PM before finishing work, I collapsed and fell over my son who was still working. I passed out and had seizure. My son took me to the hospital. I got admitted to the hospital for 2 days. After that, my son took me to Thanyarak hospital.” (Tim aged 47, interviewed on 25/12/2006)

From research I found that sample group who continuous drinking in duration 10 to 30 years develop more severe alcoholism and more alcohol withdrawal symptoms such as insomnia, phobia, anxiety, hallucination. And in 1 case who drink for 4 years (kiat, 25 years old) had drug addiction since 16 years old and change to alcohol drinking since 22 years old develop severe symptoms of alcohol withdraw

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such as nausea, vomiting, tremor, insomnia, moody, hallucination shown that every addict substance are affect to the brain indifferently correlate to the study of Sompop Reungtrakun found that those who have been drinking alcohol continually and develop alcohol dependence or alcoholism, they will develop alcohol withdrawal symptoms after stopping drinking or reducing amount of alcohol consumption include confusion, loss of memory, tremor, sweating, nausea, vomiting, restlessness, anxiety, hallucination or convulsion. (Sompop Reungtrakun, 2003: 37-38). Those who have been drinking alcohol continually over 5 years can develop psychiatric symptoms and it can be difficult to cure. Most alcoholism patients have high level of stress and depression. (Men stop drinking, Friends of Women Foundation, 2003: 14). Alcoholism would develop severe symptoms of stress about 51.2 percents and depression about 48.6 percents. (Bandit Sornpaisarn, 2006:41-42).

In terms of the relation between alcohol consumption and diseases, it has been found that there are many diseases occur directly from alcohol example: alcohol psychosis, alcohol dependence, alcohol abuse, alcoholic hepatitis and alcoholic cirrhosis of liver. There is also high risk to chronic disease such as hypertension, carcinoma of esophagus, carcinoma of liver, depression or acute episode such as accident and hurt. (www.csa.or.th).

5.2.3 Alcohol consumption behavior

Study of behaviors in 8 perpetrators and 9 victims about alcohol consumption on domestic violence found that it associates with type of alcohol, frequency of alcohol consumption, amount, location include drink alone or group drinking.

Types of alcohol

According to the study of the sample group of 8 perpetrators and partners/ husbands of 9 victims, it is found that there is similarity for the types of alcohol beverages consumed such as Thai traditional vodka (Lao khao), bear. 28 degrees and 40 degrees Thai traditional vodka (Lao khao) is the most popular alcohol, which is consumed by 13 samples as it is cheap and strong, making easier to get addicted to. 2 drink beer regularly. 1 person drinks Brown spirits and 1 drinks many types of alcohol, including Brown spirits, beer, and herb liquors.

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Frequency of alcohol consumption

According to the study of 8 perpetrators in domestic violence who attend rehabilitation at Thanyarak institute, they are heavy and chronic drinkers who have developed psychiatric symptoms. 7 of them drink alcohol everyday and 1 drinks twice a week.

“In the Morning, Evening, and sometimes I drank until 1 am’ (Wong aged 54, interviewed on 11 January 2007)

“I drank all day until I passed out and became out of control. I did not remember what happened” (Suk aged 30 interviewed on 5 January 2007)

For the partners of the 9 victims, it is reviewed that 8 of them drinks everyday and one of them drinks 4-5 times a week.

“(He) drinks all the time to the point that he would crawl in the street. In 2007 he drank heavily and would not eat. His body and hands got swollen.” (Waan, aged 54, interviewed on 21 Jan 2007)

“As soon as he woke up, he drank alcohol. He got so drunk” (Nid aged 52 interviewed on 15 January 2007)

The quantity of alcohol consumption

The 8 perpetrators in domestic violence interviewed in this study are found to have drunk alcohol in large quantity, which resulted in deterioration in physical and mental health and performance at work. 1 person drinks half a bottle of Thai traditional vodka (Lao khao) a day. 2 drink 1-1 ½ bottles of Thai traditional vodka (Lao khao) a day. 2 drink 2 bottles of Thai traditional vodka (Lao khao) a day. 1 drinks half a bottle of Brown spirit a day. 1 drinks 5 cans of beer a day. 1 drink many types of alcohol- 1 bottle of Brown spirit, or 2 bottles of beer or half a bottle of herb liquor 11 tigers a day.

From the study of the group of 9 victims in domestic violence in respect of alcohol consumption of their husband, it reviews that 3 cases (Sorn, Ooi, and Nid’s husbands) drink ½ -1 bottle of Thai traditional vodka (Lao khao) a day. 1 case (Waan’s husband) drinks 5-6 bottles of Thai traditional vodka (Lao khao) with another 3 friends. 1 case (Korn’s husband) drinks both beer and Brown spirit- 3 bottles of Brown spirit or 1-2 bottles of beer. 1 case (Sri’s husband) drinks 1-2 bottles of beer.

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In the other 3 cases, the quantity of alcohol consumption is unidentifiable as the husbands go out for drinks outside home.

The location, time, and people at time of alcohol consumption

According to the study, it is found that all of the 8 offenders drink alcohol at home. One of them drinks alone at home after work. The expense for alcohol is around 60 baht. 5 people drink alone at home all day. The expense for alcohol ranges from 80-200 baht.

“I usually drink on my own all day. I don’t like drink with others- too much fuss” (Suk, aged 30, interviewed 5 January 2007

“I drink all day at home. My wife would be upstairs. (Sak aged 39, interviewed on 26 December 2006

“As soon as I woke up, I started drinking. I drink all day. Sometimes I drank until 1 am” (Wong aged 54, interviewed on 11 January 2007

“I drank 1 drink in the morning, 1 drink at lunch time, 2 drinks in the evening. The alcohol expense each time is around 100 baht. I prefer drinking at home alone to drinking with the group of friends.” (Tim, aged 47, interviewed on 25 December 2006) “I drank at home more than outside. My kid would not have to come and get me home. Also, it is more expensive to go out for drinks. I drank heavily starting at 9 pm until early in the morning. The expense was around 200 baht” (Chai aged 39, interviewed 29 December 2007)

For the 9 victims of domestic violence, all of their partners/ husbands drink at home. 3 of them drink alone all day. 3 of them drink alone at home after work. 3 of them drink with friends after work.

“He drank all the time and crawled in the street, especially in 2007. He drank so heavily and did not eat. His body, hands, and feet got swollen.” (Waan aged 54, interviewed on 21 January 2007)

There are 4 victims whose husbands also drink outside with friends after work.

“He drank everyday after work and often returned home in the early morning. I feel so alone” (Toi)

“He drank after work at 6 pm and returned home at 4 am” (Saijai)

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From the study of researcher found that types of alcohol that perpetrators prefer to drink were Thai traditional vodka (Lao Khao), brown spirits and beers, but the most popular spirits were Thai traditional vodka (Lao Khao) 28 degrees and 40 degrees because of cheaper price and high degrees correlate to theory of Bio-Psycho-Social model of addiction that alcohol dependence depends on many factors such as biological factors, mental and personality character, social and environmental factors. But biological factors such as genetic, neurotransmitter, deterioration of brain function are influence to alcohol dependence about 40-50 percents. (Songkeit Piyaka and associates, 2002: 16-17). This is corresponding to the study of Wichai Posayajinda (2002: 50) found that Thai traditional vodka (Lao Khao) was the most favorite spirit (60.1%)and 80.2% of people who drank Thai traditional vodka still drink this kind of alcohol. Heavy drinking perpetrators drank almost everyday, Thai traditional vodka (Lao Khao)'s group drank about ½-2 bottles per day, Brown spirit's group drank about ½ -1 ½ bottles per day and beer's group drank 1-2 ½ bottles per day. (1 drink = beer 360 cc. = spirit 45 cc.). Excessive alcohol consumption behavior in male population leads to deterioration in health and quality of life (YLD) and shortening of life expectancy (Years of Life Lost). Heavy and chronic drinking (more than 6 drinks per day in man and more than 4 drinks per day in woman) damages both physical and mental heath. (Phannapa Kittiratanapiboon, 2003: 46). The types of alcohol beverage, the quantity, the frequency of alcohol consumption are the factors contributing to alcohol dependency. The epidemiologic study of alcohol consumption and effect of alcohol consumption are related to more than 60 serious diseases variable to amount of alcohol drinking. (www.csa.or.th). Trine Flensborg-Madsen concludes that the risk of developing alcoholism increases significantly by very low intakes of alcohol in women, while the risk is only increased significantly in men consuming more than 21 drinks per week.(http://alcalc.oxfordjournals.org/cgi/content/abstract/agm033v1).

Locations of drink were home or friend's house. There are two patterns of drinking, drinking alone and drinking with friends. 8 who drink alone at home would drink all day because of unemployment and develop alcohol withdrawal symptoms when stoping drinking. 4 who drink alone at home drink before dinner after work. 5 who drink with friends would drink after work. Corresponds to study of Vichai Posayajinda (2002: 54-55) found that there are 2 patterns of drinking, drinking

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alone and drinking with friends. And the most popular alcohol beverage is Thai traditional vodka (Lao Khao) in both groups. 55.1 percents of “drinking alone” drink before dinner and 58.1 percents of “group drinking” drink after work.

5.2.4 Behavior after drinking alcohol

From this study the researcher found that there were behavior changes after drinking alcohol in 17 interviewee of sample group that alcohol affect behavior, emotion and mind in all of drinker similarly such as aggressive behavior, fearless, self confidence, talkative, make aloud noise, blame, give a sharp and angry looking, be jealous, moodiness, say sarcastically, be self-willed, bawl shout, dementia, labile mood, stress, no concentrate, poor self control, nonsense and over-bearing that correlate to the theory.

“When I get drunk, I become the person who curse, speak loudly, and dare to do bad thing.” (Mr. Da, 39, interviewed on 4 Jan 2007)

“Many people told me that I became fearless, talkative, and could not control myself when I drank alcohol” (Mr.Sak, 39, interviewed on 26 Dec 2006, 6 Jan 2007)

“I couldn’t speak anything with him because he would be very angry and annoy me. He became self-centered and didn’t care his own family.” (Ms.Sri, 34, interviewed on 21 Jan 2007, 26 Feb 2007).

Form the study correspond to the study of Sompop Reungtrakun that alcohol has direct effect to brain; the toxicity of alcohol will lead to disorder of behaviors and mind such as sex abuse, aggressive behavior, moodiness, decrease in making decision ability in social and works associate with disabilities such as slurred speech, poor self control, ataxic gait and loss of concentration and memory. (Sompop Reungtrakun, 2003: 223). According to the epidemiologic study and effect to health of alcohol consumption found that alcohol induced aggressive behavior. It is believed that alcohol affects neurotransmitter such as Serotonin and GABA. It makes the drinkers tolerate to fear and worry of social and law. Their actions lead to fearless and aggressive behavior, and alcohol also affects intellectual functions. Deterioration becomes worse in problems solving, labile emotion and aggressive behavior especially in men. (http://www.csa.or.th).

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5.3 Characteristic and level of domestic violence

According to Personality theory, Akers (Akers, 1994 cited in Pornchai Khanti, 2000: 65-66) emphasized that individual personality is the cause of criminal behaviors, and personalities of criminals are antisocial and psychopath. Harvey Cleckley (Harvey Cleckley, 1941 cited in Pornchai Khanti, 2000: 66-67) concludes that characteristic of psychopath or antisocial are selfish, inconsiderate, counter response, poor responsibility, unconcerned and not ashamed to their guilt. Master and Robinson (Master and Robinson, 1990 cited in Pornchai Khanti, 2000: 68) conclude that special features of antisocial personality are; men have antisocial personality more than women and also found in drug addicts and alcoholism. This is corresponding to Self Control Theory, which explains that those with low self control are highly likely to be involved in crimes, especially physical assaults.

Heavy alcohol consumption is one of the factors lead to domestic violence. Families that member drink alcohol has a chance of domestic violence more than families that member don't drink alcohol in 3.84 fold. (Ronchai Kongsakon, 2548:50). Also research of Boonserm Huthaphat (2003: 81) concludes that 70-80 percents of sample men admit that having hot and bad-tempered, inhibit angry difficultly and may hurt the nearest persons especially their wife or children when they drunk. Domestic violence is a phenomenon involving psychological, verbal, emotional, or physical assaults perpetrated upon an individual by his/her family members such as an intimate/ partner. It is found that women usually become targets or victims of domestic violence. Alcohol abuse is a factor that leads to domestic violence. Alcohol intoxication affects behaviors and mentality of drinkers. They are more emotionally sensitive. Heavy and chronic drinkers may develop Dementia, become out of control, irrational, often break social rules, and may develop psychiatric symptoms such as anxiety, fear, and depression. The most common psychiatric symptoms are paranoia-that the wife is cheating, which cause family altercations.

In this research, the researcher studies the effect of alcohol consumption on domestic violence, classified into 2 issues-that are

5.3.1 Situations leading to violence

5.3.2 Characteristics and extents of violence upon the victims

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5.3.1 Situations leading to domestic violence

From the interview of 17 perpetrators and victims in domestic violence, it reviews that situations or events leading to violence include alcohol intoxication of male partners and jealousy towards their female partners. The events cause resentment in both parties and result in altercations and physical assaults.

“Last Saturday night, I drank Thai traditional vodka (Lao kao) with a friend from 8 am to 3 pm. I got drunk and loud. My wife told me to go away. We swore at each other. At the end, she reported to the police and put me into jail for 1 night. In the morning, my wife and the cop took me to the hospital. I was still passed out. I got spoiled because of alcohol abuse. My wife has threatened me for divorce many times.” (Tup aged 40, interviewed on 20 December 2006)

“Some guys got interested in her. I got jealous and drank heavily from work. When I came home, I told her to stay home and not to go out anywhere. But, she eventually went out. I continued drinking for another 2 hours waiting for her to come back. She returned home at 6 pm and told me that she visited her sister. I lost control and kicked her twice. We had a big fight, swearing at each other. After the fight, I went out and continued drinking with friends until I fell asleep.” (Suk aged 30, interviewed 5 January 2007)

“He drank with friends from 8 pm until 10 pm in front of the house and went out to Karaoke place to continue drinking until 2 am. I called his mobile to ask him to come home twice. He returned at 2 am. We had a big fight and got loud. He swore at me, pulled my arms, and said to me “What do you want from me? I’ll slap you with my feet” When I started to argue with him, he threatened me by lifting his arm like he was going to hit me. I stopped arguing and cried in the bathroom for 1 hour. I went to bed at 3.30 am, but could not sleep.” (Sri aged 34, interviewed on 26 February 2007)

“He swore at me every time he’s drunk. He got jealous and accused me of cheating. I could not talk to anyone as he would accuse me of cheating.” (Nid aged 53 interviewed on 15 January 2007)

From the study correspond to study of Kolb that drunken men have the poor control of himself, moody, aggressive behavior, conflict with partner, quarrel and jealousy delusion, low responsibility in work, always make illegal accident because of

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unsteady mood. (Kolb referred in Prapai Thayayuth, 2002: 14) correspond to the study of Vichai Posayajinda and association (2002:126) that the most problem that people who drink alcohol face is quarrel problem comparing with health problem and accident problem for both who drink as habitually and occasionally. According to the study of Donnapa Hongthong (2542:112-121), women whose husband drink alcohol have incident of domestic violence about 75.8%, while women whose husband don't drink alcohol have incident of domestic violence only 10.7%. The same as research of Krittiya archawanidjakun (2003: 46-47) found that situations leading to domestic violence were drunk and jealousy, ABAC poll also shown that alcohol consumption and jealousy were the cause of domestic violence. (www.thaihealth.or.th)

5.3.2 Characteristics and extent of domestic violence

Domestic violence is defined as any hurtful or unwanted behavior perpetrated upon an individual by an intimate or prior intimate, including physical, psychological and emotional, and verbal abuse. Domestic violence can be classified into 2 types as follows:

Psychological violence

Psychological abuse is the act of violence that affects the victims psychologically causing sadness, fear, humiliation, or loss of freedom. Some of psychological abuses are illustrated below:

1) ignorance
2) Storming out of the house
3) Crying
4) Raising voices, yelling, shouting
5) Nagging
6) Using coarse language
7) Verbally threatening to take a revenge
8) Verbally threatening to hit or throw things at (but no subjects in hand)
9) Insulting his/her parents
10) Vandalizing things

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The acts (1) to (3) are classified as mild level of violence, while the acts (4) to (6) are medium level of violence. The remaining are of strong level of violence and are the events that occurred within 12 months before the interview.

From the interviews of 8 perpetrators in domestic violence, it shows that characteristics and extent of psychological violence perpetrated upon their wives/ partners are mixed and happened simultaneous. The most common violence is 'medium' level of psychological violence including yelling (8 cases), nagging and insulting (5 cases), and swearing and cursing (5 cases). The second common is 'mild' level of psychological violence such as storming out of the house (5 cases), ignorance (3 cases). The (male) offenders do not use 'crying' method of violence. The high level of psychological violence such as vandalizing, insulting the other parents are the least common.

The following are the example of the real experiences that husbands abuse wives psychologically:

"I drank a bottle of rice wine. My son told me that his mom went to gambling with friends. She returned at 1 am. I swore at her and told her to go away and not to return if she still gambles. I said "You've got all your bad habit from you mom, E-hia, E-Sad". She ended up staying overnight at her friend's place" (Tim aged 47, interviewed on 25 December 2006)

"I drank alcohol from 8 am to 3 pm. I did not do anything bad apart from being loud, swearing E-hia E-Sad. My wife told me to get lost and hit me. I might have got so loud that my wife reported to the police and they took me to jail for 1 night. If I did not drink alcohol, this would not have happened. I got destroyed by alcohol." (Tup aged 40, interviewed on 20 December 2006)

For the 9 victims interviewed, it is reviewed that characteristics and extent of psychological violence upon the victims are mixed and simultaneous. The most common found are the medium level of psychological violence including yelling (8 cases), nagging and insulting (5 cases), and using coarse language (5 cases). The second most common are the low level of psychological violence such as ignorance (6 cases), storming out (1 case). The act that the male partners/ husbands never use is crying. The strong level of psychological violence such as threatening for

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revenge (1 case), threatening to hit (1 case), insulting parents (1 case) is the least common.

The following are the examples of the real life experience of the victims who are female and are psychologically abused by their own husbands.

“He drank everyday and often hung over. He wanted me to borrow money so that he could buy drinks for friends. No use. When I did not do it, he would get angry and swear at me. We had a big fight from 11 pm to 1 am. I asked him for divorce as this is my child’s future. My daughter asked me to divorce from him.” (Waan aged 45, interviewed on 21 January 2007)

Physical violence

Physical abuse is any deliberate action that directly impairs the victim's physical integrity. Physical abuse often entails psychological consequences as well. It includes:

1) throwing things at
2) Pulling or pushing
3) Pinching, biting, pulling hair
4) Slapping
5) Smashing
6) Kicking, punching, hitting
7) Hitting with objects.
8) Threatening to harm with weapons
9) Assaulting with weapons

The acts (1) to (3) are classified as mild level of violence, while the acts (4) to (6) are medium level of violence. The remaining are of strong level of violence and are the events that occurred within 12 months before the interview.

According to the study of 8 offenders who are male, it is found that the most common characteristics and extent of physical violence against their wives or partners are of strong physical violence such as kicking and punching (3 cases), threatening to harm with knives (2 cases), hitting or hitting with objects (1 case). The second most common are of mild level of physical violence such as throwing things at, pushing and pulling (3 cases). The least common are of medium level of physical violence such as slapping in the face (1 case).

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The following are the example of the real experiences that husbands abuse wives physically:

"I drank so heavily that I could not work properly. When customers ordered food, I did not remember what they ordered and made a lot of mistakes. My wife asked me to stay upstairs and not to help out at the shop downstairs. I sneaked out to buy some alcohol to drink in the room. I got so drunk and violent. I wrecked things in the room. I took a knife and hid it under my bed. My wife found out and called her parents to tell them that I might kill her. Her mom came to see me and we had a bad argument. I grabbed a knife intending to kill everyone, including myself. I felt so sorry about that incident. Because of alcohol, I almost killed people." (Sak aged 39 interviewed on 26 December 2006)

"My friends told me that my wife started to see another man. At that time, I trusted my friends and believed them. Being drunk and outraged, I pulled her out of the room and slapped her in the face, kicking, stumping on her. That incident made her ask me for divorce." (Dah aged 39, interviewed on 4 January 2007)

According to the study of 9 victims in domestic violence, it is reviewed that the most common characteristics and extent of physical violence from the perpetrators who are their husbands or partners are of medium level of violence such as slapping hitting (2 cases), pushing with feet (2 cases). The second most common are of mild level of violence, which includes pulling and pushing (1 case), pinching and pulling hair (1 case), and squeeze hands (1 case). The least common are of high level of violence such as kicking, punching (1 case), strangling and pushing against the floor (1 case) and the women of this group faced psychological abuse (2 cases) and faced both psychological and physical abuse (7 cases) .

The following are the example of the real experiences that wives were physically abused by their husbands or partners:

"During the middle of January, he got drunk since late afternoon. Around 2 am he came to me in the room, I was sleeping with my 2 nieces. He tried to wake me up tapping on my leg with his foot twice. I turned my back on him. 10 minutes later, he kicked me hard at my back and swore at me 'E-sad'. I cried and swore back at him. I felt hurt emotionally and physically. I had a chronic back problem and was on medication at that time. I think he got horny, but I was not in the

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mood to sleep with him because he was just a drunk." (Waan aged 54, aged 21 January 2007)

"Around 3 months ago, my husband drank alcohol with his 10 friends in front of the room from 6 pm to midnight. They were so loud, playing guitar, singing, yelling. I had to go to work at 7 am next morning and could not sleep. I went to him and told him to be quiet. He came to me in the room and accused me of being too fussy and inconsiderate to his friends. He locked me up in the back room and turned the light off. I banged the door loudly. He opened the door and slapped me a few times. I used my feet to push him away. He kicked and slapped me. I did not try to fight back. The neighbor came to stop him. I was so depressed as this violence occurred often. I decided to walk off to return to my hometown. I had 1,000 baht with me. He followed me to the street side. We had another argument. He did not let me go with money. I returned to the room and had another argument until very late." (Toi aged 30, interviewed on 21 January 2007)

From this research, I found that men use violence with his couple in many ways; psychological abuse and physical abuse, low level to high level. Men often use medium level of psychological abuse such as threaten, shout, and yell. The behavior that men never use is crying. Men often use high level of physical abuse with his wives such as kick and hit. The behavior that men seldom express is hitting with a weapon. For women, women are a victim of the psychological and physical violence in many ways from low level to high level. Women are often hurt by medium level of psychological abuse such as threaten, shout, and yell. Women are often also hurt by medium level and low level of physical abuse such as slap, hit, kicks, and thrown by things. Moreover, women are a victim of the psychological and physical violence several times that correlate to the research of Krittiya Archawanidjakun (2003:41-47) which found that women was hurt many times by the same and different ways such as slap, kick, punch, hit, throw with heavy stuffs.

I also found that the women face with psychological abuse and physical abuse again and again but the women still stand because of family's secure. She believes that her children should live with father and she love and care her husband very much. Moreover, she also believes that if she doesn't contradict, the incident of violent will not occur. Therefore, it is more difficult to leave from the

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violent relationship although she is fearful, upset, and anxious. Those correlate to the study of Vilasinee Pananakornsup (2002:100) which found that the violence occurs again and again. It means that women won't walk out from the relationship when the first violence occurs but she will try to explain the reason that her husband attacks her.

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CHAPTER VI
CONCLUSIONS AND SUGGESTIONS

This research is a descriptive research, in which the analysis is based on the personality theory and the self-control theory. Its objectives are to study alcohol consumption that affects domestic violence problems and to study characteristics and extent of domestic violence. The research collected data using informal interviews and in-depth interviews with question guidelines and non-participating observation. The sample group contains 17 people, in which 8 are male perpetrators and 9 are female victims in domestic violence.

6.1 Research conclusions

6.1.1 Pattern of alcohol consumption that affects domestic violence

1. Starting age for alcohol consumption

It is found that those who drink alcohol and commit domestic violence against wives or partners started drinking at the age between 15 to 22 years and have attended rehabilitation for more than once. They have developed severe alcoholism conditions such as irritability, insomnia, paranoia, hallucination, seizure, shaking, hearing noises.

2. Duration of alcohol consumption

It is reviewed that those who drink alcohol and commit domestic violence against wives or partners are chronic drinkers who have drunk alcohol for more than 5 years. In this research, the number of those who have drunk alcohol for more than 10 years is the highest, followed by those who have drunk for more than 20 years and 30 years respectively. Chronic and heavy alcohol drinking can result in psychiatric problems. Alcohol addicts often have high level of stress, irritability, aggression, and lack of self control.

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3. Alcohol consumption behavior and the effects on mental and physical health of drinkers and on domestic violence depend on

Types of alcohol

Types of alcohol consumed are a factor affecting alcohol dependence. High percentages of alcohol such as Thai traditional vodka (Lao khao), Brown spirits have strong effects on drinkers and quicker to be addicted to. It is found that the common alcohol beverages are Thai traditional vodka (Lao khao), Brown spirits, beer, including 28 degree and 40 degree Thai traditional vodka (Lao khao), which is the most popular as it is cheap and strong.

Frequency of alcohol consumption

It is reviewed that those who commit domestic violence against their partners drink alcohol heavily and frequently – on daily basis, as a result, suffering from alcoholism.

Quantity of alcohol consumption

It is found that those who commit domestic violence drink alcohol in excessive and dangerous quantity, resulting in poor health and poor performance at work. Those who drink Thai traditional vodka (Lao khao) usually drink from ½ - 2 bottles. Those who drink Brown spirits consume from ½ -1 ½ bottles and 1-2 ½ bottles for those who drink beer.

Location, time, expenses for alcohol consumption

It is reviewed that those who commit domestic violence prefer to drink alcohol at their own home or at friends' place regularly because it is cheaper than drinking at bars or pubs. Expenses each time depend on what time and who they drink with. It is found that those who drink alone at home after work have less alcohol expense- around 60 baht each time. Those who drink alone at home all day spend around 100-150 baht each time. Those who drink at home and also with friends after work spend over 200 baht each time on alcohol.

6.1.2 Behavior after alcohol consumption

It shows that those who commit domestic violence against their wives or partners have some common behavior after alcohol consumption such as being aggressive, fearless, showing off, more talkative, loud, irritable, touchy, swearing,

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verbally offensive, bad tempered, dementia, stressed, lack of self control, which lead to domestic violence.

6.1.3 Situations leading to domestic violence

It is found that situations leading to domestic violence involve intoxication of alcohol and jealousy of their female partners, causing resentment to the female and ending up with altercations and assaults.

6.1.4 Characteristics and extent of domestic violence

1. Psychological abuse

In the sample group of perpetrators of domestic violence, the research shows male perpetrators commit medium level of psychological violence the most, followed by mild level and strong level of psychological violence respectively.

Medium level of psychological violence committed the most includes yelling, raising voice.

Mild level of psychological violence committed the most is storming off. Crying is not used by male as part of their violence acts.

Strong level of psychological violence used the most is vandalizing. The behavior least found in this category is insulting the other's parents.

In the sample group of female victims (wives), the research shows female victims experience medium level of psychological violence the most, followed by mild level and strong level of psychological violence respectively.

Medium level of psychological violence women experience the most is yelling, raising voice.

Mild level of psychological violence experienced the most by women is ignorance, not responding to the need and what women have to say. Crying is not used by male as part of their abusive acts.

Strong level of psychological violence received by women includes threatening to revenge, threatening to harm, insulting the other's parents, and vandalizing.

2. Physical Abuse

In the sample group of perpetrators of domestic violence, the research shows male perpetrators commit strong level of physical violence the most, followed by mild level and medium level of physical violence respectively.

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For strong level of physical violence, the most committed violence includes kicking and punching. For the least committed violence in this category is hitting partners/ wives with objects.

For mild level of physical violence, the most committed violence is throwing things at partners, pulling or pushing. Pinching, biting, and pulling hair are not used by male as part of their violent acts.

For medium level of physical violence, the most committed violence is slapping at the face.

In the sample group of female victims (wives), the research shows female victims experience medium level of physical violence the most, followed by mild level and strong level of physical violence respectively.

For medium level of physical violence, women experience slapping, hitting, and pushing with feet the most.

For mild level of physical violence, women experience pulling, pushing, squeezing arms.

For strong level of physical violence, women experience kicking, punching, and strangling on the floor.

6.2 Research findings

Alcohol abuse in male has a harmful effect to physical and mental health deterioration, poor performance at work, and abandonment of family. All the money earned is spent on alcohol rather than household needs, causing conflict in partnership and often leading to altercations and domestic violence. Alcohol consumption is the principles factor of both physical and mental violence affect to physical and mental health of women lead to fear, depression and anxiety.

From the study, I found that the sample groups lack of knowledge to toxicity of alcohol especially toxicity to the brain when drinking alcohol in large amount and last long. Toxicity to the brain includes dementia and may be severe to develop Alcoholic Psychosis that can not be cure. Result of no concern and lack of knowledge of moderate alcoholic consumption and severity of alcoholic intoxication lead this sampling groups have a high risks to alcoholic psychosis and wrong attitude about alcohol consumption lead to bad health and lack of responsibility to oneself, family

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and social. The campaign of moderate drinking and health education about toxicity of alcohol to the people especially the youth must be done instead of the campaign of stop drinking because alcohol is used as the tool of interconnection between the people in many activities.

So health education about alcohol consumption to make awareness to people in moderate alcohol drinking can prevent many problems include short term problems, long term problems and domestic violence also.

6.3 Suggestions

Suggestion from research

From the study of the sampling group's alcohol consumption behavior, the government sector must cooperate with the private sector to prevent alcohol consumption problem and violence problem by:

1. Campaigning to provide health education to the target group especially young people have more awareness of hazards of heavy alcohol drinking and alcohol intoxications especially it may destroys brain and causes alcoholic psychosis, depression, aggressive personality, delusion, hurt, suicide and also knew that moderate drinking is safe and causes no harms to themselves and other people, together with campaigns against, reduce and stop drinking alcohol continuously.

2. Establishment of Help Center for women who suffer from domestic violence in every community and province will provide them with access to social and legal helps including health rehabilitations in order to reduce the extent of violence against women such as divorce and suicide problems.

Suggestion for future research

1. In this research, the sample group is in the low socioeconomic group. The research in the future should study the middle class and upper class to see the differences in domestic violence.

2. Further studies in policy and laws of domestic violence for guideline of help and prevent the problems.

Problems and obstacle

1. Reward given to interviewees should be goods rather than money. From this research, the researcher paid money to interviewees as reward and it made the

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interviewees misunderstand that the owner of the interview place got commission from researcher.

2. Some interviewees didn't agree to be voice recorded and some victims' relatives didn't allow the victim to participate in the interview because they thought that the husbands would be condemned and blamed. Due to the private nature of domestic violence, we should not appoint interviewees at the same time and do not interview in the areas that near persons can hear the conversations.

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APPENDIX

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Appendix A
Consent Form

แบบฟอร์มใบยินยอมตนให้ทำการวิจัย
โดยได้รับคำบอกกล่าวและเต็มใจ (Informed Consent Form)

ข้าพเจ้ายินดีเข้าร่วมการวิจัยเรื่อง "การบริโภคเครื่องดื่มแอลกอฮอล์ที่มีต่อปัญหาความรุนแรงในครอบครัว'' ที่ดำเนินการวิจัยโดยนางกัลยา งามเอกเอื้อ นักศึกษาปริญญาโท สาขาวิทยาการเสพติด บัณฑิตวิทยาลัย มหาวิทยาลัยมหิดล

ก่อนลงนามในใบยินยอมตนให้ทำการวิจัย ข้าพเจ้าได้รับคำอธิบายและทราบดีว่าการวิจัยนี้มีวัตถุประสงค์ของการวิจัย วิธีการวิจัย อันตราย หรืออาการที่อาจเกิดขึ้นจากการวิจัย รวมทั้งประโยชน์ที่จะเกิดขึ้นจากการวิจัยอย่างระเอียด และมีความเข้าใจดีแล้ว

ผู้วิจัยรับรองว่าจะตอบคำถามต่าง ๆ ที่ข้าพเจ้าสงสัยด้วยความเต็มใจ ไม่ปิดบังซ่อนเร้นจนข้าพเจ้าพอใจ

ข้าพเจ้ามีสิทธิที่จะบอกเลิกการเข้าร่วมโครงการวิจัยครั้งนี้เมื่อใดก็ได้และเข้าร่วมโครงการวิจัยนี้โดยสมัครใจและการบอกเลิกการเข้าร่วมการวิจัยนี้จะไม่มีเงื่อนไขและไม่ต้องบอกเหตุผลในการถอนตัว

ผู้วิจัยรับรองว่าจะเก็บข้อมูลเฉพาะที่เกี่ยวกับตัวข้าพเจ้าเป็นความลับ จะนำไปใช้ประโยชน์และจะนำเสนอได้เฉพาะในการสรุปผลการวิจัยในลักษณะที่เป็นภาพรวม โดยไม่มีการเปิดเผยชื่อของข้าพเจ้า การเปิดเผยข้อมูลเกี่ยวกับตัวข้าพเจ้าต่อหน่วยงานต่างๆ ที่เกี่ยวข้องกระทำได้เฉพาะกรณีจำเป็นด้วยเหตุผลทางวิชาการเท่านั้น รวมถึงว่าหากมีข้อมูลเพิ่มเติมที่ส่งผลกระทบต่อการวิจัยผู้วิจัยจะแจ้งให้ข้าพเจ้าทราบโดยไม่ปิดบังซ่อนเร้น

ผู้วิจัยรับรองว่า การวิจัยครั้งนี้เป็นการตอบคำถามแบบสัมภาษณ์ และขอบันทึกเสียงการพูดเพื่อนำไปถอดเป็นข้อความเอาไว้เท่านั้นและเทปบันทึกเสียงจะถูกทำลายเมื่อการวิจัยเสร็จสิ้นลง ความเสี่ยงและอันตรายแทบจะไม่มีเลย อย่างไรก็ตามอาจทำให้ข้าพเจ้ารู้สึกอึดอัดบ้าง

ข้าพเจ้าได้อ่านข้อความข้างต้นแล้ว และมีความเข้าใจดีทุกประการ และได้ลงนามในใบยินยอมนี้ด้วยความเต็มใจ

ลงนาม.....ผู้ยินยอม

ลงนาม.....พยาน

ลงนาม.....พยาน

วัน / เดือน / ปี.....

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Appendix B

Questionnaire A

Questionnaire

(Perpetrators)

Code…….

Date of Interview……Place……..

Interviewer……

Part 1 Personal Data

Age……years. Occupation …… Income.……Baht/day.

Marriage Status…… (couple, divorce, separate). Number of Children…….

Education……Religion……Number of Sisters and Brothers…….

Family members are alcohol addition …….....

Give details…….

Family members that drink alcohol …….

Give details……..

First drink began at…….years old. Duration of drink…….years.

Behavior (Example; hot temper, intolerance, grumble complain, clam cool, taciturn quite.)

……

…….

Part 2 Patterns of Alcohol Consumption and Problems of Domestic Violence

Question for Pattern of Alcohol Consumption

1. Type of favorite liquors frequently drinks. (Example; beer, wine, Thai Traditional vodka, brandy, herb liquor, etc.)

……

…….

2. How often do you drink alcohol? (Example: drink everyday or almost everyday, two times per week, one time per 2-3 weeks, once a month)

……

……..

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3. Amount of liquor drinking per a time (Example: gugs, bottles, cans)

……

……..

4. Place to drink liquor (Example: house, restaurant, workplace, entertainment zone, etc.)

……

……..

5. Whom do you often drink with? (Example: drink alone, family, friends, colleague, customer etc.)

……

……..

6. Expense for drinking liquor per one time……..baht.

Question for Domestic Violence

1. After drinking liquor, how do your emotion and behavior change?

……

……..

2. Do you think that alcohol makes you dare to show off?

……

……..

3. Do you think that you can control yourself when you drink liquor?

…. ……

……....

4. Did you make a quarrel with other people or with your family member when you drink? If yes, why?

……

……..

5. Amount of alcohol you drink that can make you make a quarrel or domestic violence.

……

……....

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6. Does alcohol increase incident of domestic violence? Why?

……

……

7. Do children follow drinking behavior from their parents? Why?

……

……..

8. When you were young, did you see your parent make a quarrel? Did the experience in domestic violence affect you direct or indirect? How?

……

……

9. Is domestic violence common? Did you find a way to solve the problem? And did the family members ask for solve the problem?

……

……

10. Do you think that alcohol is cause of domestic violence? How?

……

……

11. Please describe the first time you made a quarrel with your wife/husband after drinking alcohol. When did it happen? Which issues? How often? How did you made a quarrel?

11.1 Low level of mental violence such as

- Keep silence, Ignore
- Go out from room or house in a hurry
- Crying

……

……

11.2 Medium level of mental violence such as

- Yell, Shout
- Use insulting language, look down, compare with animal
- Speak rudely

……

……

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11.3 High level of mental violence such as

- Threaten
- Pretend to throw things
- Blame the parent of their wife/husband
- Destroy household things

……
……..

11.4 Low level of physical violence such as

- Throw things
- Push or pull
- Pinch, bite, pull hair

……
……..

11.5 Medium level of physical violence such as

- Slap
- Beat

……
……

11.6 High level of physical violence such as

- Hit, kick, punch
- Hit with object
- Threaten to attack with weapon
- Attack with weapon

……
……

12. Please describe the most violence you made with your wife/husband and the most violent that occurred from alcohol. How? When did it happen? How did you make violence? Why do you think that the event is the most violence? How was the effect? How was your feeling?

……
……....

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Part 3 Observation data

Times of data collection ……..

Date……. From……to……o’ clock

Characteristic of the interviewee

……

……

Environment and situation during interview

……

……

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Appendix C

Questionnaire B

Questionnaire

(Victims)

Code…….

Date of Interview……Place……..

Interviewer……

Part 1 Personal Data

Age……years. Occupation …… Income.……Baht/day.

Marriage Status…… (couple, divorce, separate). Number of Children…….

Education……Religion……Number of Sisters and Brothers…….

Family members that drink alcohol……..

Family members are alcohol addition……...

Did you know that your wife/husband drank alcohol before got marry? …….

Part 2 Domestic violence in family

1. Do you think that the behavior and mood of your wife/husband change after drinking alcohol?

……

……..

2. Do you think that alcohol is a cause of uncontrollable emotion? Why?

……

……

3. Do you think that alcohol makes less responsibility in a family and relation in a family change? How?

……

……

4. Do you think that alcohol makes domestic violence such as quarrel, harm? How?

……

……...

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5. Did you grow up in family that had domestic violence?

……

……..

6. Is domestic violence common? How did you feel when it happened to you?

……

……...

7. When did the first time of domestic violence occur after marry? Did alcohol involve? Which issues? When did it occur? How long? How often? How were you done when the quarrel occurred?

……

……

7.1 Low level of mental violence such as

- Keep silence, Ignore
- Go out from room or house in a hurry
- Crying

……

……

7.2 Medium level of mental violence such as

- Yell, Shout
- Use insulting language, look down, compare with animal
- Speak rudely

……

……

7.3 High level of mental violence such as

- Threaten
- Pretend to throw things
- Blame the parent of their wife/husband
- Destroy household things

……

……..

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7.4 Low level of physical violence such as

- Throw things
- Push or pull
- Pinch, bite, pull hair

……

……..

7.5 Medium level of physical violence such as

- Slap
- Beat

……

……

7.6 High level of physical violence such as

- Hit, kick, punch
- Hit with object
- Threaten to attack with weapon
- Attack with weapon

……

……

8. Please describe the most violent that your husband/wife made to you after dinking alcohol. How? When did it happen? How was violence? Why do you think that the event is the most violence?

……

……....

9. The reason that you were hurt

……

……

10. How did you feel with the action of your wife/husband?

……

……

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11. How did the action of your wife/husband affect your emotion? How did you deal with it?

……

……....

12. Did the action of your wife/husband hurt you? How? And how did you deal with it?

……

……..

13. When the domestic violence occurred, whom did you consult the problem with?

……

……

Part 3 Observation data

Times of data collection ……..

Date……. From……to……o' clock

Characteristic of the interviewee

……

……..

Environment and situation during interview

……

……..

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Appendix D

No. MU 2006-223

Documentary Proof of Ethical Clearance
The Committee on Human Rights Related to Human Experimentation
Mahidol University, Bangkok

Title of Project: Alcohol Consumption on Domestic Violence
(Thesis for Master Degree)

Principle Investigator: Mrs. Kalaya Ngamakeur

Name of Institution: Faculty of Graduate Studies

Approved by the Committee on Human Rights Related to Human Experimentation

Signature of Chairman: .....
(Professor Dr.Srisin Khusmith)

Signature of Head of the Institute: .....
(Professor Dr.Pornchai Matangkasombut)

Date of Approval: 14 DEC 2006

Date of Expiration: 13 DEC 2007

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Appendix E

Table 3

Personal information of the perpetrators and the victims in domestic violence

Name	age	Occupation	Income	Education	Marital status
1. Mr Tup	40	Unemployed	-	Year 9	Married, 2 children
2. Mr Tim	47	Tradesman	10000 B/M	Year 4	Married, 2 children
3. Mr Chai	39	Barber	1000 B/D	Year 9	Married, 2 children
4. Mr Wong	54	Unemployed	-	Year 9	Married, 2 children with ex
5. Mr Sak	39	Take away food	40000 B/M	Year 6	Married, 1 child
6. Mr Dah	39	Unemployed	-	Year 9	Divorced, no child
7. Mr Kiet	25	Tradesman	180 B/D	Year 6	married, 1 child
8. Mr Suk	30	Worker	6000 B/D	TAFE	Divorced, 1 child
9. Mrs Wan	54	Unemployed	-	Year 4	Married, 2 children
10.Mrs Waan	45	Factory worker	191 B/D	Year 4	Married, 1 child
11.Mrs Toi	30	Factory worker	191 B/D	Year 6	Married, 1 child
12.Mrs Sri	34	Factory worker	280 B/D	Year 6	Married, 1 child
13. Mrs Nid	53	Worker	10000 B/D	Year 4	Married, 2 children with ex
14.Mrs Ooi	40	Car repair worker	5000 B/M	Year 6	Married, 2 children
15.Mrs Kon	53	Apartment rental	15000 B/M	Year 4	Married, 2 children
16. Mrs Sorn	53	Factory worker	215 B/D	Year 4	Married, no child
17.Mrs Saijai	18	Factory worker	191 B/D	Year 9	Married, no child

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Appendix F

Table 4: The pattern of alcohol consumption

Details	The number of cases	Note
1. Starting age for alcohol consumption (perpetrators)		
15 years of age	1	
17 years of age	1	
18 years of age	2	
20 years of age	3	
22 years of age	1	
2. Duration of alcohol consumption (perpetrators or husbands of the victims)		
Over 4 years	1	
Over 10 years	7	
Over 20 years	5	
Over 30 years	4	
3. Types of alcohol		
Lao khoa 28 degrees, 40 degrees	13	
Beer	2	
Brown spirit	1	
Brown spirit and beer	1	
Brown spirit, beer, and Herb liquor	1	
4. Frequency of alcohol consumption		
Everyday	15	
4-5 days a week	1	
2 days a week	1	
5. Quantity of alcohol consumption a day		
½ bottle of Lao khoa	2	
½ -1 bottle of Lao khoa	3	
1-1½ bottle of Lao khoa	2	
2 bottles of Lao khoa	2	
5-6 bottles of Lao khoa (with friends)	1	
½ - 1 ½ bottle of Brown spirit	3	
1-2 bottle of beer	3	
5 cans of beer	1	
6. Location, time, and people to drink with		
At home, alone, all day	8	
At home, alone, in the evening	4	
At home, with friends, in the evening after work	5	

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Appendix G

Table 5: Situations leading to domestic violence

Source of information	Cause	
Perpetrators		
Mr Tup	drunk	
Mr Tim	drunk	
Mr Chai	drunk	
Mr Sak	drunk	jealousy
Mr Dah	drunk	jealousy
Mr Keit	drunk	
Mr Suk	drunk	jealousy
Mr Wong	drunk	jealousy
Victims		
Mrs Wan	drunk	
Mrs Waan	drunk	
Mrs Toi	drunk	jealousy
Mrs Ooi	drunk	
Mrs Nid	drunk	jealousy
Mrs Korn	drunk	
Mrs Sorn	drunk	
Mrs Sri	drunk	
Mrs Saijai	drunk	

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Appendix H

Table 6: Characteristics and extent of domestic violence that occurred within 12 months before the interview

Characteristics of violence	Extent of violence	the number of cases	
		perpetrators	victims
Psychological violence			
-Storming off the house	Mild	5	1
-Ignorance	Mild	3	6
-Yelling, raising voice	Medium	8	8
-Verbal insult	Medium	5	5
-Swearing, using coarse language	Medium	5	5
-Vandalizing	Strong	4	1
-insulting the other's parents	Strong	1	1
-Threatening to revenge	Strong	-	1
-Threatening to hit or throw things at (no objects in hand)	Strong	-	1
Physical violence			
-throwing things at	Mild	1	1
-Pulling & pushing	Mild	3	1
-Pulling hair	Mild	-	1
-Squeeze arms hard	Mild	-	1
-Slaping face	Medium	1	-
-Hitting	Medium	-	2
-Pushing away with feet	Medium	-	2
-Kicking and punching	Strong	3	1
-Threatening with knife	Strong	2	-
-Hitting or attempt to hit with objects	Strong	1	-
-Stumping	Strong	1	-
-Strangling on the floor	Strong	-	1

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BIOGRAPHY

NAME	Mrs Kalaya Ngamakeur
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